JONES DAY

Digitally signed by Kathryn Ross Date: 2018.10.12 09:32:36 -04'00'

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October 10, 2018

CONFIDENTIAL COMMUNICATION

VIA E-MAIL TO CELA@FEC.GOV

Federal Election Commission Office of Complaints Examination & Legal Administration Attn: Donna Rawls 1050 First Street, N.E. Washington, DC 20463

Re: Matter Under Review 7486

Dear Office of Complaints Examination & Legal Administration:

On behalf of 45Committee, Inc., enclosed is a response to the Complaint in the abovecaptioned MUR.

Very truly yours,

L. word unu

E. Stewart Crosland

Enclosure

ALKHOBAR • AMSTERDAM • ATLANTA • BEIJING • BOSTON • BRISBANE • BRUSSELS • CHICAGO • CLEVELAND • COLUMBUS • DALLAS DETROIT • DUBAI • DUSSELDORF • FRANKFURT • HONG KONG • HOUSTON • IRVINE • JEDDAH • LONDON • LOS ANGELES • MADRID MEXICO CITY • MIAMI • MILAN • MINNEAPOLIS • MOSCOW • MUNICH • NEW YORK • PARIS • PERTH • PITTSBURGH • RIYADH SAN DIEGO • SAN FRANCISCO • SÃO PAULO • SHANGHAI • SILICON VALLEY • SINGAPORE • SYDNEY • TAIPEI • TOKYO • WASHINGTON

BEFORE THE FEDERAL ELECTION COMMISSION

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MUR 7486

RESPONSE OF 45COMMITTEE, INC. TO THE COMPLAINT

45Committee, Inc. hereby submits this response to the Complaint in the above-captioned Matter Under Review. The Complaint alleges that 45Committee – a tax exempt 501(c)(4) social welfare organization – must register with the FEC as a "political committee" under the Federal Election Campaign Act ("the Act"). That is false. 45Committee's public communications, statements, and organizational documents, as well as its spending history – both over the course of its lifetime and in any single year – demonstrate that its "major purpose" is issue advocacy and grassroots lobbying and organizing, not federal campaign activity. The Commission thus has no reason to believe that 45Committee has violated the Act or FEC regulations by not registering as a political committee and must dismiss this matter and close the file immediately.

FACTUAL BACKGROUND

45Committee, Inc. is an independent, social welfare organization tax exempt under section 501(c)(4) of the Internal Revenue Code, which annually reports to the Internal Revenue Service. It was established in April 2015 to engage primarily in issue advocacy campaigns. A sister political committee, Future45 (ID No. C00574533), was created at the same time to engage primarily in federal electoral advocacy. From inception, 45Committee has, consistent with its name, sought to "educat[e] Americans on possible solutions to the challenges facing the 45th President of the United States." 45Committee, <u>https://45committee.com</u>.

45Committee's plainly stated organizational mission is to "promot[e] solutions to the issues that confront the United States during the 45th President's term. To that end,

45Committee . . . advocate[s] for reforms and solutions on a wide range of public policy issues." See Ex. A, at 2 (2017 45Committee IRS Form 990); Ex. B, at 2 (2016 45Committee IRS Form 990); see also 45Committee, Issues, https://45committee.com/issues (announcing goal of "advocating for solutions to the issues confronting the 45th President of the United States"); 45Committee (@45_Committee), Twitter, https://twitter.com/45_committee?lang=en ("45Committee is an independent organization committed to promoting solutions to top-priority issues confronting the 45th President of the United States."); 45Committee, About, Facebook, https://www.facebook.com/pg/45Committee/about/?ref=page_internal ("45Committee is an organization devoted to promoting solutions to the issues that will confront the United States during the next president's term.").

From its founding in 2015 until today, 45Committee has engaged in substantial issueoriented activities in furtherance of its mission. In 2015, when the organization was ramping up, building out its team and researching issues, it provided \$655,000 in "grants to other 501(c)(4) entities engaged in issue advocacy in the public policy and foreign policy arenas." Ex. B, at 2. In 2016, 45Committee engaged in substantial issue advocacy campaigns – including through television, digital, and direct mail – "in areas related to foreign policy, national security, healthcare, size of government, role and make-up of the federal judiciary, role of the Internal Revenue Service, reducing the tax burden, ethics issues related to federal officials, improving the regulatory environment, [and] promoting entrepreneurship." Ex. A, at 2. The organization also made over \$3 million in additional "grants to other 501(c)(4) entities in line with these issues" in 2016. *Id.* In 2017, among other things, "45Committee successfully advocated for tax reform to promote jobs and tax relief for American families," launching a widespread campaign. *See* 45Committee, <u>https://45committee.com</u>; *see also, e.g.*, David M. Drucker, *Pro-Trump group*

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goes after House Republicans reluctant on tax reform, Washington Examiner (Nov. 13, 2017) ("45Committee is committed to passing tax cuts that deliver for America's working families."" (quoting 45Committee Chairman and President, Brian Baker)).¹ As part of that project – named "The Middle Class Project" – 45Committee launched two national television ads supporting the tax bill, released fifty-four individualized television and digital ads about the legislation addressed to specific swing Senators and Representatives, and deployed field teams to several states to help drive grassroots support for the bill. See 45Committee, Middle Class Project, https://middleclassproject.com/?utm_source=newsletter&utm_medium=email&utm_campaign=n ewsletter axiosam&stream=top-stories; see also Jonathan Swan, Scoop: Pro-Trump group plans 8-figure ad campaign for tax cuts, Axios (Nov. 1, 2017) ("The 45Committee is launching 'The Middle Class Project,' a 501(c)(4) with an opening TV spot, 'What's In It For You,' that will debut nationally with tomorrow's bill introduction.").² In both 2017 and 2018, in addition to promoting other issues facing the administration, 45Committee deployed advertising and grassroots advocacy campaigns in support of key confirmations, including those of Attorney General Jeff Sessions, Secretary of State Mike Pompeo, and Supreme Court Justices Neil Gorsuch and Brett Kavanagh. See, e.g. Niels Lesniewski, With Kavanaugh Hearings Underway, Supreme Court Ads Fill the Airways, Roll Call (Sept. 5, 2018) (discussing "seven figure ad-buy from the Trump agenda-supporting 45Committee" concerning Kavanagh confirmation);³ Fredreka Schouten, A GOP group steps up to boost Jeff Sessions, USA Today (Jan. 23, 2017) ("The 45Committee is positioning itself as an outside advocacy group that is equipped to help

¹ <u>https://www.washingtonexaminer.com/pro-trump-group-running-new-ads-promoting-gop-tax-bill</u>.

² <u>https://www.axios.com/scoop-pro-trump-group-plans-8-figure-ad-campaign-for-tax-cuts-1513306590-6a81f91c-96a4-40b4-a70d-19b529d29403.html</u>.

³ <u>https://www.rollcall.com/news/politics/kavanaugh-hearings-underway-scotus-ads-fill-airways.</u>

Trump's administration wage policy battles with Democrats in the years ahead.").⁴ The organization will "continue to advocate for policies that strengthen national security, ensure quality education, and fix what was broken in energy, immigration, health care, and more." 45Committee, <u>https://45committee.com</u>. Examples of 45Committee's activities – and the organization's overwhelming focus on policy matters – are available on its website. *See, e.g.*, 45Committee, *Videos*, <u>https://45committee.com/videos</u>.

45Committee's spending on these activities as part of its engagement in the public policy debate has been the majority of its total spending throughout its existence, consistent with its status as a tax-exempt social welfare organization. *See* Ex. C ¶¶ 3–7 (Declaration of Treasurer Maria Wojciechowski). Accordingly, less than half of the organization's total spending has gone toward political activity. From its inception through September 2018, only 37% (approximately \$25 million) of its total spending has been on express advocacy and electioneering communications, while just under 62% (approximately \$42 million) has been spent on issue advocacy. *See id.* ¶ 4.

In each of its fiscal years, covering April through March of the following calendar year, including thus far in the 2019 fiscal year, less than half of the organization's total spending has been on political activity, including electioneering communications. *Id.* ¶ 5. In fiscal year 2016, 45Committee's first year in existence, 65% of total spending was on issue advocacy, and only 10% was on political activity. *Id.* In fiscal year 2018, the breakdown was 86% issue, 13% political. *Id.* And, through September 2018, more than 90% of 45Committee's 2019 fiscal year spending has been on issue advocacy. *Id.*

⁴ <u>https://www.usatoday.com/story/news/politics/onpolitics/2017/01/23/gop-group-steps-up-boost-jeff-sessions/96948594</u>.

During the 2017 fiscal year, which encompassed the 2016 elections, 45Committee spent nearly \$23.5 million on issue advocacy. *See id.* ¶ 6; *see also* Ex. A, at 2. During the same period, 45Committee reported only approximately \$21.7 million in spending on political activity. *See* Ex. C ¶ 6; *see also* Ex. A, at 20 (Form 990 Schedule C). 45Committee made one electioneering communication, in an aggregate amount of \$671,320, during this period. *See* Ex. C ¶ 6. 45Committee appropriately treated the costs of that electioneering communication as issue-related on its Form 990; but even if considered political activity, 45Committee's political spending during the 2017 fiscal year was less than 50% of its total spending. *See id.*; *see also* Compl. ¶ 15. In fact, even if *all* of the operating costs 45Committee incurred during the 2017 fiscal year (approximately \$447,000) were additionally allocated as political expenses, 45Committee's political spending still was under 50% of total expenditures. *See* Ex. C ¶ 7.

ARGUMENT

The Complaint asserts that 45Committee is a political committee under the Act and therefore must register and report to the FEC. Yet the actual facts overwhelmingly prove these specious allegations wrong. Indeed, 45Committee is not a "political committee" as that term is understood under governing case law and FEC precedents. Rather, it is an issues-focused social welfare organization, and the Commission must dismiss this matter immediately as yet another example of the partisan misuse of the FEC complaint process to put a high price on opponents who raise their voices in the issues debate.

I. LEGAL BACKGROUND

The Act and FEC regulations define a "political committee" as "any committee, club, association, or other group of persons which receives contributions aggregating in excess of \$1,000 during a calendar year or which makes expenditures aggregating in excess of \$1,000

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during a calendar year." 52 U.S.C. § 30101(4)(A); 11 C.F.R. § 100.5. Notwithstanding this \$1,000 threshold for contributions and expenditures, the Supreme Court admonished in *Buckley v. Valeo* that, to avoid vagueness and overbreadth concerns, the term "political committee" – and its attendant disclosure burdens – can only "encompass organizations that are under the control of a candidate or *the major purpose of which is the nomination or election of a candidate.*" 424 U.S. 1, 79 (1976) (emphasis added); *see also FEC v. Mass. Citizens for Life*, 479 U.S. 238, 252 n.6 (1986) ("[A]n entity subject to regulation as a 'political committee' under the Act is one that is either under the control of a candidate or the major purpose of which is the nomination or is election of a candidate." (internal quotation mark and citation omitted)). The Complaint does not (and cannot) allege that 45Committee is under the control of any federal candidate. Accordingly, since 45Committee did surpass the Act's \$1,000 spending threshold in 2016, it could only be deemed a political committee if its "major purpose" is the nomination or election of federal candidates.

To assess "the major purpose" of an organization, the FEC reviews the group's overall activity on a case-by-case basis. *CREW v. FEC*, 209 F. Supp. 3d 77, 82 (D.D.C. 2016) (citing *Shays v. FEC*, 511 F. Supp. 2d 19, 30 (D.D.C. 2007)). This requires the Commission to weigh various circumstantial considerations, such as the organization's public statements, organizational documents, and spending. *See, e.g.*, Statement of Reasons of Comm'rs Goodman, Hunter & Petersen, MUR 6396 (Crossroads GPS), at 1, 6–9; *see also Mass. Citizens for Life*, 479 U.S. at 262 (noting that an organization that would otherwise be exempt from the Act's requirements would be classified as a political committee if its "independent spending becomes so extensive that the organization's major purpose may be regarded as campaign activity"). "Basically, if an organization explicitly states, in its bylaws or elsewhere, that influencing

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elections is its primary objective, or if the organization spends the majority of its money on supporting or opposing candidates, that organization is under 'fair warning' that it may fall within the ambit of *Buckley*'s test." *N.C. Right to Life, Inc. v. Leake*, 525 F.3d 274, 289 (4th Cir. 2008) (applying *Buckley* major purpose test under North Carolina law).

II. 45COMMITTEE'S "MAJOR PURPOSE" IS ISSUES, NOT ELECTIONS

Even though the Commission does not apply any bright-line rules when evaluating political committee status, 45Committee cannot be a political committee under *Buckley*'s "major purpose" test. *First*, 45Committee's central organizational purpose is to engage primarily in issue advocacy, not campaign activity. *Second*, the organization's spending on political activity, as a factual matter, has constituted a minority of total spending overall and in each fiscal year, including fiscal year 2017.

A. 45Committee's central organizational purpose is to advocate on issues, not the nomination or election of federal candidates.

As detailed in the factual presentation above, 45Committee was established primarily to promote public policies and engage in issue advocacy and grassroots lobbying concerning issues facing the 45th President's administration. Consistent with its name,⁵ its overriding mission is to "promot[e] solutions to the issues that confront the United States during the 45th President's term. To that end, 45Committee . . . advocate[s] for reforms and solutions on a wide range of public policy issues." *See, e.g.*, Ex. A, at 2. The organization's public communications, statements, and organizational documents reflect its issues-focused objective, and confirm that

⁵ The Complaint wrongly contends that 45Committee's name is somehow indicative of a political purpose. *See* Compl. ¶¶ 30.i, 31. The name has nothing to do with any specific politician or candidate. From its inception in 2015, the organization's mission was always to advocate with respect to critical issues confronting the administration of the 45th President of the United States – regardless of who held the office.

45Committee's central organizational purpose is not the nomination or election of federal candidates.

The Complaint points to nothing to the contrary. Instead, it offers only excerpts from unsourced media reports discussing (and often conflating) both 45Committee and Future45. Those articles in no way indicate that anyone associated with 45Committee ever has held out the organization as anything but a 501(c)(4) social welfare organization that, under the law, can engage in some political activity. *See, e.g.*, Compl. ¶ 6 n.2 (identifying 45Committee as "an issue-advocacy organization"). One *Politico* article crucial to the Complaint seizes on a misguided quotation about 45Committee donors that *Politico* attributes to only an unnamed "fundraiser" who is "not connected to" 45Committee. *See id.* ¶ 7. Unsourced news articles and erroneous statements from unidentified sources having no connection to 45Committee are not credible and cannot be attributed to 45Committee. Indeed, the Commission has consistently rejected allegations "based upon unsworn news reports, anonymous sources, and an author's summary conclusions and paraphrases" because they "provide questionable legal basis to substantiate a reason to believe finding." Statement of Reasons of Comm'rs Goodman, Hunter & Petersen, MUR 6661 (Robert E. Murray, et al.), at 8.

B. 45Committee's spending activity demonstrates it is overwhelmingly focused on the discussion of issues, not the nomination or election of candidates.

Consistent with its 501(c)(4) tax-exempt status, an accurate analysis of 45Committee's spending on political activity shows its political spending has remained below 50% of its total spending – on the aggregate and year over year – and thus cannot lead to a conclusion that 45Committee's "major purpose" is engaging in federal campaign activity. As the Commission has recognized, "[s]ocial welfare organizations registered with the IRS under 26 U.S.C. 501(c)(4) may work in political candidate elections . . . as long as that activity remains secondary

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to their primary, non-political work." Advance Notice of Proposed Rulemaking, *Definition of Political Committee*, 66 Fed. Reg. 13,681, 13,683 n.3 (Mar. 7, 2001); *see also* 26 C.F.R. § 1.501(c)(4)-1. For that reason, former Senator John McCain – one of the principal Senate sponsors of the Bipartisan Campaign Reform Act – appropriately noted, in comments filed with the Commission, that "*Section 501(c) groups* . . . *cannot have a major purpose to influence federal elections, and are therefore not required to register as federal political committees, as long as they comply with their tax law requirements.*" Attachment to Comments of John McCain and Russell D. Feingold on Reg. 2003-07 (Political Committee Status) (Apr. 2, 2004) (emphasis added).

As noted in the factual discussion above, less than 37% of 45Committee's total spending has been on political activity (including electioneering communications) over its lifetime. *See* Ex. C ¶ 4. Although there is no rigid rule as to the timeframe under which the Commission must review an organization's relative spending, *see CREW*, 209 F. Supp. 3d at 93–94, a lifetime assessment provides the only accurate measure if the Commission wants to avoid an artificial result in this matter and other similar cases. *See id.* at 94 ("Given the FEC's embrace of a totality-of-the-circumstances approach to divining an organization's 'major purpose,' it is not *per se* unreasonable that the Commissioners would consider a particular organization's full spending history as relevant to its analysis."). 45Committee was established only a little over three years ago, shortly before an election year, and remains a going and active issue advocacy organization today. It thus is different from the organization of lifetime approach where organization was 15 years old and had "spent no money on election-related spending [for several years], but then shifted its expenditures towards electioneering communications and express advocacy *over the*

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following several years" (emphasis added)). In fact, Commissioners have previously warned of the risks inherent in reviewing spending of organizations like 45Committee under a single-year standard: "The organization's major purpose determination would be based upon a distinct minority of its spending Despite the group's best efforts to minimize its election-related expenditures, the Commission would ignore the timeframe the group used to determine *ex ante* its major purpose." Statement of Reasons of Comm'rs Goodman, Hunter & Petersen, MUR 6589 (American Action Network), at 25–26.

Nonetheless, even under a single-year approach, 45Committee is not a political committee as the Complaint alleges. In each of its fiscal years, including 2017, less than half of its total spending has been on political activity. Ex. C ¶ 5. This is true whether or not political spending accounts for 45Committee's limited electioneering communications.⁶ *See id.* ¶¶ 5–6. Such spending by a 501(c)(4) social welfare organization does not clearly signify a *major* purpose of engaging in campaign advocacy. *See CREW*, 209 F. Supp. 3d at 94–95 (recognizing reasonableness of considerations of 50%-of-total spending threshold).⁷

* * *

For the foregoing reasons, the Commission must dismiss the Complaint. By any reasonable application of the "major purpose" test, 45Committee is not a federal political

⁶ The Complaint wrongly speculates that "other spending in 2016 may have been intended to support the nomination or election of a candidate in the 2016 election." Compl. ¶ 29. All it points to in support is the fact that 45Committee reported to the IRS that it paid certain of its media placement vendors more than was disclosed to the FEC. *Id.* It should come as no surprise to anyone that 45Committee used the same media vendors to place *both* its political and issue advertisements.

⁷ The Complaint additionally contends that a mere six tweets and one Facebook post issued by 45Committee prior to the 2016 elections are indicative of a political purpose. *See* Compl. ¶¶ 12 (tweets), 13 (Facebook). A visit to 45Committee's social media platforms today makes clear that its social-media activity has been overwhelmingly issue oriented. 45Committee (@45_Committee), Twitter, <u>https://twitter.com/45_committee?lang=en</u>; 45Committee, Facebook, <u>https://www.facebook.com/pg/45Committee/posts/?ref=page_internal</u>. Nevertheless, free social media posts are exempt from FEC regulation and, other than any express statements of organizational purpose, cannot reasonably be considered when assessing an organization's "major purpose." 11 C.F.R. § 100.155.

committee. It is a social welfare organization whose "major purpose" is issue advocacy and grassroots lobbying and organizing. This undeniable fact is supported by 45Committee's public statements, organizational documents, and spending history. 45Committee, therefore, respectfully requests that the Commission dismiss this matter and close the file.

Exhibit A

			WON74000045							
			** PUBLIC DISCLOSURE COP	Y **						
	0	00	Return of Organization Exempt Fro	om l	ncome Tax	OMB No. 1545-0047				
Forr	n J	90	cept private foundation	» 2016						
Depa	be made public.	Open to Public								
_		nue Service	▶ Information about Form 990 and its instructions is at			Inspection				
		_		ding M	IAR 31, 2017					
B C a	heck if	le: C Name of	forganization		D Employer identification	ation number				
	٦Addre	ss 1500	MMITTEE, INC.							
	_chang Name				47-38	03/87				
-	_chang _Initial _return	<u>v</u>	usiness as and street (or P.O. box if mail is not delivered to street address) Roo	om/suite	E Telephone number	03407				
F	Final		BOX 710993	JIII/Suite		36-3994				
L	→return termir ated	<u></u>	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	46,362,986.				
	Amen	ded UTDN	DON, VA 20171		H(a) Is this a group ret					
			nd address of principal officer: BRIAN BAKER		for subordinates?					
	pendi	^{ng} SAME	AS C ABOVE		H(b) Are all subordinates incl					
ΙT	ax-ex	empt status:	501(c)(3) X 501(c) (4) ◀ (insert no.) 4947(a)(1) or	527		st. (see instructions)				
			MMITTEE.COM		H(c) Group exemption	number 🕨				
κF	orm of	f organization: [X Corporation Trust Association Other ►	L Year	of formation: 2015 M	State of legal domicile: VA				
Pa	irt I	Summary								
e	1	Briefly describ	be the organization's mission or most significant activities: ADVOCA	TE F	'OR REFORMS A	ND				
Activities & Governance		SOLUTIO	NS ON A WIDE RANGE OF PUBLIC POLICY	ISS	SUES.					
erna	2	2 Check this box ▶ □ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)								
j0ve	3									
ت ھ	4	Number of inc	lependent voting members of the governing body (Part VI, line 1b) \ldots			5				
ies			of individuals employed in calendar year 2016 (Part V, line 2a)			0				
ivit			of volunteers (estimate if necessary)			0				
Act			d business revenue from Part VIII, column (C), line 12			0.				
	b	Net unrelated	business taxable income from Form 990-T, line 34	<u></u>		0.				
					Prior Year	Current Year				
ue			and grants (Part VIII, line 1h)		2,225,000.	46,362,986.				
Revenue		0	ce revenue (Part VIII, line 2g)		0.	0.				
Be			come (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.				
			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,225,000.	46,362,986.				
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		655,000.	3,579,000.				
			milar amounts paid (Part IX, column (A), lines 1-3)		0.000.	0.				
			to or for members (Part IX, column (A), line 4)	····· —	0.	0.				
ses	15	Drofossional f	r compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.				
Expenses	104	Total fundraia	undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) \blacktriangleright 1,250			0.				
Ĕ	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	•	353,489.	41,977,334.				
			es Add lines 13-17 (must equal Part IX, column (A), line 25)		1,008,489.	45,556,334.				
			expenses. Subtract line 18 from line 12		1,216,511.	806,652.				
or es	19		oxpenses. Subtract inter to nonnine 12		ginning of Current Year	End of Year				
ets (lanc	20	Total assets (I	Part X, line 16)		1,216,511.	2,023,163.				
et Assets or ad Balances			(Part X, line 10)		0.	0.				
Fund			fund balances. Subtract line 21 from line 20		1,216,511.	2,023,163.				
	irt II				, , ,	,,				
		-	I declare that I have examined this return, including accompanying schedules and	nd statem	ents, and to the best of my	knowledge and belief, it is				
			. Declaration of preparer (other than officer) is based on all information of which			- ·				

Sign Here	Signature of officer MARIA WOJCIECHOWSKI, TREASURER Type or print name and title	Date
Paid Preparer	Firm's name ATCHLEY & ASSOCIATES, LLP	Date Check PTIN $2/15/18$ $f_{self-employed}$ P01257722 Firm's EIN $74-2920819$
Use Only	Firm's address 1005 LA POSADA DRIVE AUSTIN, TX 78752	Phone no. (512)346-2086
May the I	RS discuss this return with the preparer shown above? (see instructions)	

632001 11-11-16 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2016)

	1 990 (2016) 45COMMITTEE, INC.	47-3803487	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission: 45COMMITTEE IS AN ORGANIZATION DEVOTED TO PROMOTING ISSUES THAT CONFRONT THE UNITED STATES DURING THE 45' TERM. TO THAT END, 45COMMITTEE WILL ADVOCATE FOR REF	TH PRESIDENT'S	
	ON A WIDE RANGE OF PUBLIC POLICY ISSUES.		
2	Did the organization undertake any significant program services during the year which were not listed on prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	37	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program serv If "Yes," describe these changes on Schedule O.	vices? Yes	XNo
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to revenue, if any, for each program service reported.	to others, the total expenses, a	
4a	(Code:) (Expenses \$ 23,457,138 · including grants of \$ 3,579,000 ·) ISSUE ADVOCACY IN AREAS RELATED TO FOREIGN POLICY, NA		v ,
	HEALTHCARE, SIZE OF GOVERNMENT, ROLE AND MAKE-UP OF		±,
	JUDICIARY, ROLE OF THE INTERNAL REVENUE SERVICE, RED		
	BURDEN, ETHICS ISSUES RELATED TO FEDERAL OFFICIALS, REGULATORY ENVIRONMENT, PROMOTING ENTREPRENEURSHIP,	IMPROVING THE	THER
	501(C)(4) ENTITIES IN LINE WITH THESE ISSUES.		
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4d	Other program services (Describe in Schedule O.)		
τu)	
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 23,457,138.	/	
		Form 9	90 (2016)
63200	12 11-11-16		(
	2		

15410215 796448 06784 2016.05050 45COMMITTEE, INC.

Form	990 (2016) 45COMMITTEE, INC. 47-3803	487	Р	age 3
Pa	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			37
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			x
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	4.4%		x
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VIII</i>	110		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		- 23
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's separate of consolidated initial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
12u	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X

Form **990** (2016)

632003 11-11-16

	990 (2016) 45COMMITTEE, INC. 47-380	3487	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete Schedule K. If</i> " <i>No</i> ", <i>go to line 25a</i>	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes," <i>complete Schedule L, Part I</i>	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		x
28	of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	(0010)

Form **990** (2016)

632004 11-11-16

Form	990 (2016) 45COMMITTEE, INC. 47-3803	487	P	age 5					
	t V Statements Regarding Other IRS Filings and Tax Compliance	107		age o					
	Check if Schedule O contains a response or note to any line in this Part V								
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 10		100						
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1							
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c	Х						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 0								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х					
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country: ►								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a	Х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b	Х						
7									
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
-	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
a	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
10-	amounts due or received from them.)	10-							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a							
а	Is the organization licensed to issue qualified health plans in more than one state?	138							
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the								
u	organization is licensed to issue qualified health plans 13b								
~	Enter the amount of reserves on hand 13c								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>					

Form **990** (2016)

632005 11-11-16

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	990 (2016) 45COMMITTEE , INC.		47-380		P	age
Pai	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th			a "No" r	espor	ise
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O					
	Check if Schedule O contains a response or note to any line in this Part VI			<u></u>		
bec	tion A. Governing Body and Management				V	
10	Enter the number of voting members of the governing body at the end of the tax year	1a		5	Yes	1
Ia	If there are material differences in voting rights among members of the governing body at the end of the tax year	la				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.					
h	Enter the number of voting members included in line 1a, above, who are independent	1b	1	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	<u> </u>				
2				2		
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision	~		ا
0	of officers, directors, or trustees, or key employees to a management company or other person?			3		
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		┢
6	Did the organization have members or stockholders?			6		
о 7а	Did the organization have members, stockholders, or other persons who had the power to elect or a			-		\vdash
74				7a		
b		tockho	lders or	74		+ ·
5				7b		
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the	e followina [.]			
	The governing body?			8a	Х	
	Each committee with authority to act on behalf of the governing body?			8b	X	┢
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			0.0		┢
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal R					
		0101140	0000)		Yes	
0a	Did the organization have local chapters, branches, or affiliates?			10a		†
	If "Yes," did the organization have written policies and procedures governing the activities of such c					┢
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod			11a	Х	\square
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		Ū			
				12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," de	scribe			
	in Schedule O how this was done			12c	Х	
3	Did the organization have a written whistleblower policy?			13	Х	Γ
4	Did the organization have a written document retention and destruction policy?			14	Х	Γ
5	Did the process for determining compensation of the following persons include a review and approv	al by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a		
	Other officers or key employees of the organization			15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	ith a			
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga					
	exempt status with respect to such arrangements?			16b		
ec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright ext{DC}$, $ ext{VA}$					
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	(Secti	on 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain	in Sch	edule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	f interest policy, ar	nd finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records:			
	MARIA WOJCIECHOWSKI - 832-236-3994					
	P.O. BOX 710993, HERNDON, VA 20171					
2000	5 11-11-16			Form	990	(2
	б					
10	215 796448 06784 2016.05050 45COMMITTEE, II	NC.		067	784_	

Form 990 (2	016) 45COMMITTEE, INC.	47-3803487	Page 7							
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
Employees, and Independent Contractors										
	Check if Schedule O contains a response or note to any line in this Part VII									
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

(D)

(^)

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

 (\mathbf{C})

(D)

(E)

X Check this box if neither the organization	or any related	organization compensat	ed any current officer,	director, or trustee
	(D)		(5)	(5)

Name and Title	Average hours per week	Position (do not check more than one box, unless person is both an offerer and offered/function Reportable compensation Reporta					Reportable compensation from related	Estimated amount of other		
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) BRIAN O. WALSH	10.00									
CHAIRMAN/PRESIDENT (THRU 9/13/16)		X		Х				0.	0.	0.
(2) BRIAN BAKER	10.00									_
CHAIRMAN/PRESIDENT (AS OF 9/14/16)		Х		х				0.	0.	0.
(3) SARA FAGEN	4.00									
DIRECTOR		X						0.	0.	0.
(4) RANDY SCHEUNEMANN	4.00									
DIRECTOR (THRU 9/15/16)		х						0.	0.	0.
(5) ROB COLLINS	4.00									
DIRECTOR		X						0.	0.	0.
(6) MATT WELL	4.00									•
SECRETARY		X		Х				0.	0.	0.
(7) MARIA WOJCIECHOWSKI	4.00			x				0.	0.	0.
TREASURER										
632007 11-11-16	1	<u> </u>	<u> </u>	L	<u> </u>	1	<u> </u>	1	I	Form 990 (2016)

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7 2016.05050 45COMMITTEE, INC.

Form 990 (2016) 45COMMITTEE, INC. 47-380											487	Pa	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than d is both	n an	(D) Reportable compensation from	(E) Reportable compensati from relate	ion		(F) stimate nount other		
	(list any hours for related organizations below line)	below love the set of direction of the set o						the organization (W-2/1099-MISC)	organization (W-2/1099-MI		fr org an	pensa om the anizat d relat anizatie	e ion ed
1b Sub-total									-	0.			0.
c Total from continuation sheets to Par d Total (add lines 1b and 1c)								0		0.			0.
2 Total number of individuals (including b	ut not limited to th							eceived more than \$1	00,000 of reportat	ole			0
compensation from the organization	•											Yes	No
3 Did the organization list any former offinition list any former offinition 1a? <i>If</i> "Yes," <i>complete Schedule J</i> f				-	•			highest compensated			3		X
4 For any individual listed on line 1a, is th and related organizations greater than \$	e sum of reportab	le co	ompe	ensa	ation	n anc	l ot	her compensation fro		1	4		х
5 Did any person listed on line 1a receive	or accrue compe	nsat	ion f	rom	any	unr	elat	ted organization or inc	dividual for service	S			
rendered to the organization? If "Yes," of Section B. Independent Contractors	complete Schedul	e J f	or si	ich j	oers	son .					5		X
1 Complete this table for your five highes the organization. Report compensation	•	•								mpens	ation	from	
(A) Name and busin								(B) Description of		С		C) nsatio	n
DEL CIELO MEDIA LLC, 14 STE 102, ALEXANDRIA, N		E Z	AVE	ENU	JE ,	,		MEDIA ADS S	ERVICES	17	,35	9,5	00.
CONNELL DONATELLI INC P.O.BOX 1877, ALEXANDRI	A , VA 22	231	L3					MEDIA ADS S	ERVICES			7,2	
DDC, 805 15TH ST. NW, STE 300, WASHINGTON, DC 20005 MEDIA ADS SERVICES										1,9			
MENTZER MEDIA SERVICES, INC., 210 W.							MEDIA ADS S				0,3		
TARGET ENTERPRISES, LLC BLVD., STE 1240, SHERMA	C, 15260 V	VEI	JTU	JRA	ł			MEDIA ADS S				0,7	
2 Total number of independent contracto \$100,000 of compensation from the org	rs (including but n					-							
											Form	990 (2	2016)

632008 11-11-16

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Form	n 99	0 (2	2016) 45COM	MITTEE,	INC.			47-3803	487 Page 9
Pa	rt V	/111	Statement of Rever	nue					
			Check if Schedule O cont	ains a response	e or note to any lir	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Its	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
S, G			Fundraising events						
ar /			Related organizations						
s, C			Government grants (contribut						
r Si			All other contributions, gifts, gran						
but			similar amounts not included abo		46,362,986.				
d Or		q	Noncash contributions included in lines						
anc			Total. Add lines 1a-1f			46,362,986.			
					Business Code	, ,			
e	2	а							
Program Service Revenue	-	b							
Sel		c							
am eve		d							
B		e							
Pro			All other program service reve						
			Total. Add lines 2a-2f						
	3		Investment income (including						
	Ŭ		other similar amounts)						
	4		Income from investment of ta						
	5		Royalties		•				
	Ŭ		noyanies	(i) Real	(ii) Personal				
	6	2	Gross rents		(ii) i cisonai				
	Ŭ		Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)						
	7		Gross amount from sales of	(i) Securities	1				
	'	a	assets other than inventory						
		h	Less: cost or other basis						
		D	and sales expenses						
		~	Gain or (loss)						
			Net gain or (loss)						
	0		Gross income from fundraisin						
Other Revenue	Ŭ	ŭ	including \$						
svel			contributions reported on line						
Å			Part IV, line 18	-					
the		h	Less: direct expenses						
ō			Net income or (loss) from fund						
			Gross income from gaming ac	-					
	3	a	Part IV, line 19						
		h	Less: direct expenses						
			Net income or (loss) from gam						
			Gross sales of inventory, less						
	10	u	and allowances						
		h	Less: cost of goods sold						
			Net income or (loss) from sale						
		-	Miscellaneous Revenu		Business Code				
	11	а	Wildeelianeous nevena	0	Business Code				
	•••	b							<u> </u>
		c							
			All other revenue						
			Total. Add lines 11a-11d						
	12	č	Total revenue. See instructions.			46,362,986.	0.	0.	0.
63200		- 11			F	,,	· · · ·		Form 990 (2016)
0						_			(=0.0)

9 15410215 796448 06784 2016.05050 45COMMITTEE, INC.

Form	990 (2016) 45COMMITTEE	, INC.		47-3	803487 Page 10
Pa	t IX Statement of Functional Expens	es			
Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respor		-		
Doi	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			9	
-	and domestic governments. See Part IV, line 21	3,579,000.	3,579,000.		
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
Ū	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
b	Legal	150,630.	6,203.	144,427.	
c	Accounting	61,694.		61,694.	
d	Lobbying	-			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
•	column (A) amount, list line 11g expenses on Sch 0.)	444,344.	294,000.	150,344.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology	26,975.		26,975.	
15	Royalties				
16	Occupancy				
17	Travel	51,504.		51,504.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	12,484.		12,484.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	20 602 151			
а	POLITICAL ADS AND MEDIA	20,683,151.		20,683,151.	·
b	ISSUE ADS AND MEDIA	18,914,352.	18,914,352.	067 364	
С	RESEARCH	1,379,964.	412,600. 250,983.	967,364.	
d	EVENT SPONSORSHIP	250,983. 1,253.	430,903.	3.	1 250
	All other expenses	45,556,334.	23,457,138.	3. 22,097,946.	1,250. 1,250.
25	Total functional expenses. Add lines 1 through 24e	40,000,0040	2J, ±J/, ±J0•	44,031,340.	±,2JU•
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	oggoational oumpaign and runuraising soliditation.				

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_____ if following SOP 98-2 (ASC 958-720)

Check here

Form **990** (2016)

Form 990 (2016)	45COMMITTEE,	INC.
Part X	Balance Shee	t	

	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	1,216,511.	1	2,023,163.
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
ets	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
b	Less: accumulated depreciation 10b		10c	
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	1 010 511	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,216,511.	16	2,023,163.
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22 ies	Loans and other payables to current and former officers, directors, trustees,			
oilit	key employees, highest compensated employees, and disqualified persons.			
Liabilities	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of		05	
00	Schedule D	0.	25	0.
26	Total liabilities. Add lines 17 through 25	0.	26	
	Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.			
9 9 97			27	
27 28 28	Unrestricted net assets		28	
о 20 29	Temporarily restricted net assets		20 29	
	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here		23	
ш ъ	and complete lines 30 through 34.			
Net Assets or Fund Balances 7 E U 0 6 8 2 2 7 C 1 0 0 6 8 2 2	Capital stock or trust principal, or current funds	0.	30	0.
9 30 9 31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
31 J2	Retained earnings, endowment, accumulated income, or other funds	1,216,511.	32	2,023,163.
Z 33	Total net assets or fund balances	1,216,511.	33	2,023,163
34	Total liabilities and net assets/fund balances	1,216,511.	34	2,023,163.
		_,,		Form 990 (2016

Form **990** (2016)

632011 11-11-16

Form	1990 (2016) 45COMMITTEE , INC.	47-38	303487	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	46,362		
2	Total expenses (must equal Part IX, column (A), line 25)	2	45,556		
3	Revenue less expenses. Subtract line 2 from line 1	3	806		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,216	, 5	11.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,023	,1	63.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2016)

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Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Employer identification number

47-3803487

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Schedule B

Name of the organization

Organization type (check one):

45COMMITTEE, INC.

Section:
X 501(c)(4) (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization
501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

	B (Form 990, 990-EZ, or 990-PF) (2016)		Page
Name of or	rganization		Employer identification number
45COM	MITTEE, INC.		47-3803487
Part I	Contributors (See instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
1		\$500,0	000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
2		\$1,000,0	000. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
3		\$\$	000. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
<u>4</u>		\$\$	000. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
5		\$\$	000. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ons Type of contribution
6		\$100,0	Person X Payroll

noncash contributions.) Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)		Page
Name of or	ganization		Employer identification number
45COM	MITTEE, INC.		47-3803487
Part I	Contributors (See instructions). Use duplicate copies of Part I if addi	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
7		\$2,500,0	00. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
8		\$1,005,0	Person X Payroll Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
9		\$5,000,0	00. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
10		\$1,000,0	00. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
11		\$2,500,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
12		\$250,0	Person X Payroll

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)			Page 2
Name of or	ganization		Employer identif	ication number
45COM	MITTEE, INC.		47-380	3487
Part I	Contributors (See instructions). Use duplicate copies of Part I if addit	ional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons Type	(d) e of contribution
13		\$250,0	(Comp	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons Type	(d) e of contribution
14		\$500,0	(Comp	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons Type	(d) e of contribution
15		\$7,9	(Comp	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons Type	(d) e of contribution
16		\$ <u>1,000,0</u>	Per: Pay) 0 0 . (Comp	son X
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons Type	(d) e of contribution
17		\$ <u>7,500,0</u>	(Comp	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons Type	(d) e of contribution
18		\$ <u>7,500,0</u>	(Comp	

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)		Page
Name of or	ganization		Employer identification number
45COM	MITTEE, INC.		47-3803487
Part I	Contributors (See instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
19		\$7,500,0	00. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
20		\$7,500,0	00. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2016)		
Name of organization	Employer identification number	
45COMMITTEE, INC.	47-3803487	

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
15 TF	AVEL EXPENSES		
		\$7,986.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
 		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

2016.05050 45COMMITTEE, INC.

e **3**

ame of organiza			Employer identification num
	TEE, INC.		47-3803487
t	he year from any one contributor . Complete	columns (a) through (e) and the follo	d in section 501(c)(7), (8), or (10) that total more than \$1, owing line entry. For organizations
c	completing Part III, enter the total of exclusively religio Jse duplicate copies of Part III if addition	us, charitable, etc., contributions of \$1,000 c	or less for the year. (Enter this info. once.)
a) No.	· · · ·		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>			
		(e) Transfer of gi	ft
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
—			
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			[
		(e) Transfer of gi	ft
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ft
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	π
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
0454 40 45 15			Schedule B (Form 990, 990-EZ, or 990-
3454 10-18-16		19	Goneulie D (1 0111 330, 330-EZ, 01 330-

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
 ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Nan	ne of organization				Emplo	oyer identification number
		ITTEE, INC.				47-3803487
Pa	rt I-A Complete if the or	ganization is exempt unde	r section 501(c)	or is a section 5	527 or	ganization.
1 2 3	Political campaign activity expend Volunteer hours for political camp	aign activities			_	21,650,515. 0.
Pa	rt I-B Complete if the or	ganization is exempt unde	r section 501(c)(3).		
1	Enter the amount of any excise ta	x incurred by the organization unde	r section 4955		🏲 💲 _	
2	Enter the amount of any excise ta	x incurred by organization managers	s under section 4955		▶\$_	
3	If the organization incurred a sect	on 4955 tax, did it file Form 4720 fo	r this year?			Yes No
4a	Was a correction made?					Yes No
	If "Yes," describe in Part IV.					
Pa	rt I-C Complete if the or	ganization is exempt unde	r section 501(c),	except section	501(c	
1	Enter the amount directly expende	ed by the filing organization for sect	ion 527 exempt funct	ion activities	.►\$	21,650,515.
2	Enter the amount of the filing orga	nization's funds contributed to othe	er organizations for se	ction 527		
	exempt function activities				. ▶\$	
3		es. Add lines 1 and 2. Enter here and				
	line 17b				►\$	21,650,515.
4	Did the filing organization file Form					
5	Enter the names, addresses and e	employer identification number (EIN)	of all section 527 pol	litical organizations t	o which	the filing organization
	1 9 8	ation listed, enter the amount paid	0 0			
	-	promptly and directly delivered to a s			separat	e segregated fund or a
	political action committee (PAC). I	f additional space is needed, provid	e information in Part I	IV.		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizatio funds. If none, ent	on's	(e) Amount of political contributions received and promptly and directly

	filing organization's funds. If none, enter -0	contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990 or 990-EZ) 2016

632041 11-10-16

OMB No. 1545-0047

Open to Public

Inspection

16

Schedule C (Form 990 or 990-EZ) 2016 45C Part II-A Complete if the organize section 501(h)).	ation is exe	empt under section	on 501(c)(3) and file	ed Form 5768 (e	3803487 Page Plection under
A Check 🕨 🛄 if the filing organization be	-		n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share of expenses in the state of expenses of the state	, ,	. ,			
B Check ▶ if the filing organization ch	IECKED DOX A 2	and "limited control" pr	ovisions apply.	(a) Filing	(b) Affiliated gro
Limits on I (The term "expenditures)	obbying Expe means amo		.)	organization's totals	totals
1a Total lobbying expenditures to influence	public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influence					
c Total lobbying expenditures (add lines 1a	and 1b)				
e Total exempt purpose expenditures (add					
f Lobbying nontaxable amount. Enter the					
If the amount on line 1e, column (a) or (b) is		bbying nontaxable an			
Not over \$500,000 Over \$500,000 but not over \$1,000,000		f the amount on line 16 00 plus 15% of the ex			
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the ex			
Over \$1,500,000 but not over \$17,000,00		00 plus 5% of the exc			
Over \$17,000,000	\$1,000	•			
· , , ,	· · /	,			
g Grassroots nontaxable amount (enter 25	% of line 1f)				
h Subtract line 1g from line 1a. If zero or le	ss, enter -0-				
i Subtract line 1f from line 1c. If zero or les	s, enter -0- 📖				
j If there is an amount other than zero on e reporting section 4911 tax for this year?		· · ·	zation file Form 4720		Yes
(Some organizations that ma	de a section	veraging Period Unde 501(h) election do not rate instructions for I	have to complete all o	f the five columns	below.
l	obbying Expe	enditures During 4-Ye	ar Averaging Period		ł.
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2016

632042 11-10-16

Schedule C (Form 990 or 990-EZ) 2016 45COMMITTEE, INC.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k)
of the	olobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		. 1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OR	(b) Par	t III-A, lir	ne 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2 a		
b	Carryover from last year		2b		
с	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
	expenditure next year?				
5	Taxable amount of lobbying and political expenditures (see instructions)		. 5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	, lines 1 a	and 2 (see	
instru	ictions); and Part II-B, line 1. Also, complete this part for any additional information.				

PART I-A, LINE 1:

15410215 796448 06784

POLITICAL ADVERTISING PRODUCTION AND RESEARCH.

Schedule C (Form 990 or 990-EZ) 2016

					1 table ions for Form 990.	s listed in the line	Enter total number of other organizations listed in the line 1 table	3 Enter total nun
▼ 2.				e line 1 table	ganizations listed in th	nd government or	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	2 Enter total num
			0.	200,000.	501(C)(4)	20-2303252	005	INGTON ,
TO FURTHER THE ORGANIZATION'S EXEMPT	0						NETWORK W. STE 268	JUDICIAL CRISIS NETWORK 3220 N STREET NW, STE 2
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			o	2,000,000.	501(C)(4)	27-3711817	ICA NOW 3T NW, STE 450N DC 20036	SECURE AMERICA NOW 1800 M STREET NW, WASHINGTON, DC 200
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	275,000.	501(C)(4)	54-1850126	IY LIST IIRE AVE., STE 750 20036	SUSAN B. ANTHONY LIST 1200 NEW HAMPSHIRE AVE., WASHINGTON, DC 20036
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE				250,000.	501(C)(4)	27-0182697	FREEDOM COALITION INC WOOD PARKWAY STE 975 1 30096	FAITH AND FREEDO 3700 CRESTWOOD P DULUTH, GA 30096
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			•	350,000.	501(C)(6)	53-0045720	COMMERCE	US CHAMBER OF CO 1615 H ST. NW WASHINGTON, DC :
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE				129,000.	501(C)(4)	46-3437207	ITIATIVE A AVENUE NW STE 610 20004	THE JOHN HAY INITIATIVE 801 PENNSYLVANIA AVENUE WASHINGTON, DC 20004
(h) Purpose of grant or assistance	(g) Description of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	(d) Amount of cash grant	(c) IRC section (if applicable)	(b) EIN	1 (a) Name and address of organization or government	1 (a) Name and a or g
IV, line 21, for any	/es" on Form 990, Part	Inization answered "Y	omplete if the orga led.	c Governments. Co onal space is need	zations and Domestin be duplicated if addit	Domestic Organi \$5,000. Part II car	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Part II Grants a
tion XYes No	sistance, and the select	/ for the grants or ass	grantees' eligibility States.	or assistance, the funds in the Unitec	e amount of the grants	:o substantiate th stance? ocedures for moni	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	1 Does the orgar criteria used to 2 Describe in Pa
						nd Assistance	General Information on Grants and Assistance	Part I General
Employer identification number 47-3803487						EE, INC.	ation 45COMMITTEE	Name of the organization
Open to Public Inspection	0.	at www.irs.gov/form990.		Attach to Form 990 Form 990) and its instri	► Attach to Form 990. Information about Schedule I (Form 990) and its instructions is	Informat		Department of the Treasury Internal Revenue Service
OMB No. 1545-0047		nizations, iited States art IV, line 21 or 22.	ce to Organ s in the Uni ^o on Form 990, Par	er Assistand d Individual nanswered "Yes"	Grants and Other Assistance to Organ Governments, and Individuals in the Un Complete if the organization answered "Yes" on Form 990, P	Compl		SCHEDULE I (Form 990)

632101 11-01-16

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Schedule I (Form 990)							
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	25,000.	501(C)(4)	81-4729054	ONE NATION HEALTH COALITION 1747 PENNSYLVAVIA AVE NW, STE 1000 WASHINGTON, DC 20006
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	15,000.	501(C)(3)	26-4066298	FRANKLIN CENTER FOR GOVERNMENT & PUBLIC INTEGRITY - 1229 KING STREET, 3RD FLOOR - ALEXANDRIA, VA 22314
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	15,000.	501(C)(3)	52-1340267	INTERNATIONAL REPUBLICAN INSTITUTE 1225 EYE STREET NW, STE 800 WASHINGTON, DC 20005
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	70,000.	501(C)(4)	53-0116130	NRA INSTITUTE FOR LEGISLATIVE ACTION - 11250 WAPLES MILL RD FAIRFAX, VA 22030
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	100,000.	501(C)(4)	47-1867507	SHINING CITY COMMUNITY 45 NORTH HILL DRIVE, STE 100 WARRENTON, VA 20186
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			°.	50,000.	501(C)(4)	36-4534086	INDEPENDENT WOMEN'S VOICE 1875 I STREET NW, STE 500 WASHINGTON, DC 20006
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	100,000.	501(C)(4)	26-4683543	AMERICAN ENCORE P.O. BOX 72465 PHOENIX, AZ 85050
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	(d) Amount of cash grant	(c) IRC section if applicable	(b) EIN	(a) Name and address of organization or government
		edule I (Form 990), Pa	nited States (Sche	nizations in the Ur	vernments and Orga	Assistance to Go	nof
47-3803487 Page 1	4.					EE, INC.	Schedule I (Form 990) 45COMMITTEE ,

632241 04-01-16

Schedule I (Form 990)

Schedule I (Form 990) (2016) 45COMMITTEE, IN	INC.				47-3803487 Page 2
r Assistance to Domestic Individ	s. Complete if the	organization answ	ered "Yes" on Form §	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other	uired in Part I, line	e 2; Part III, columr	ר (b); and any other a	additional information.	
PART I, LINE 2: A GRANT REPORT IS REQUESTED FROM THE		RECIPIENT WITHIN	SIX MON	THS OF	
RECEIVING THE GRANT. THE RECIPIENT	MUST	ALSO ATTEST	r THAT THEY	HAVE USED	
THE FUNDS FOR THE PURPOSES OUTLINED	D IN THEIR	IR APPLICATION	ATION.		
PART 1, LINE 2:					
A GRANT APPLICATION IS REVIEWED AND	ID APPROVED	3D BY THE	BOARD OF D	DIRECTORS.	

632102 11-01-16

SCHEDULE L		Tra	nsaction	ıs V	Vith	Inte	erested	P	ersons			O	/IB No.	1545-0	047
(Form 990 or 990-EZ)	Complete if	the o	28b, or 28c, o	or For	m 990-	-EZ, Pa		a or		26, 27,	28a,		20	16)
Department of the Treasury Internal Revenue Service	Information	about	-						at www.irs.gov/fe	orm99	0.	_	pen T spect		DIIC
Name of the organization														on ni	umber
			EE, INC.									034	87		
					-)(29) organizatior	-	-				
Complete if the	organization		elationship betv			1	ne 25a or 25i	D, 01	r Form 990-EZ, P	art V,	line 40	JD.	(4)	Corre	ected?
(a) Name of disqualified	person	(6) 11	person and or				(0	c) De	escription of tran	sactic	n		<u> </u>	es	No
													_	-+	
														\rightarrow	
2 Enter the amount of tax	incurred by	the o	rganization man	agers	or disc	qualified	d persons du	ring	the year under						
3 Enter the amount of tax	, if any, on lir	ne 2, a	above, reimburs	sed by	the or	ganizati	ion				▶ \$				
Part II Loans to an	d/or From	1 Int	erested Per	sons	;_										
Complete if the	organization	answ	vered "Yes" on I	Form 9	990-EZ	. Part V	, line 38a or	Forn	n 990, Part IV, lir	ie 26;	or if th	ne orga	anizati	on	
reported an amo	-					-									
(a) Name of	(b) Relation		(c) Purpose		oan to or n the		Original	(f	i) Balance due	(g)		(h) Ap by bo	ard or	(i) V	Vritten
interested person	with organiz	ation	of loan	organi	ization?		pal amount			defa		cómm	ittee?	-	ement?
				То	From					Yes	No	Yes	No	Yes	No
														<u> </u>	
Total							> \$								
Part III Grants or As	ssistance	Ben	efiting Inter	reste	ed Pe	rsons									
Complete if the	-								(
(a) Name of interested	person		 b) Relationship interested pers the organiza 	son an			Amount of Assistance		(d) Type assistan) Purp assista)†
		-													
		-									-+				
		+									-+				
		+									+				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2016

632131 10-24-16

Schedule L (Form 990 or 990-EZ) 2016 45COMMITTEE, INC.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
REDPRINT STRATEGY	SEE PART V	30,000.	MANAGEMENT		X

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: REDPRINT STRATEGY

(D) DESCRIPTION OF TRANSACTION: MANAGEMENT CONSULTING

PART IV, COLUMN B

BRIAN WALSH, WHO SERVED AS CHAIRMAN AND PRESIDENT OF THE ORGANIZATION

THRU 9/13/16, IS A PARTNER IN REDPRINT STRATEGY.

Schedule L (Form 990 or 990-EZ) 2016

632132 10-24-16

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/f		OMB No. 1545-0047 2016 Open to Public Inspection
Name of the organization	ⁿ 45COMMITTEE, INC.		identification number 803487
FORM 990, PA	RT III, LINE 2, NEW PROGRAM SERVICES:		
ISSUE ADVOCA	CY IN AREAS RELATED TO FOREIGN POLICY, NATION	AL SEC	URITY,
HEALTHCARE,	SIZE OF GOVERNMENT, ROLE AND MAKE-UP OF THE F	EDERAL	
JUDICIARY, R	OLE OF THE INTERNAL REVENUE SERVICE, REDUCING	THE T	AX
BURDEN, ETHI	CS ISSUES RELATED TO FEDERAL OFFICIALS, IMPRO	VING T	HE
REGULATORY E	NVIRONMENT, PROMOTING ENTREPRENEURSHIP, AND G	RANTS	TO OTHER
501(C)(4) EN	TITIES IN LINE WITH THESE ISSUES.		
FORM 990, PA	RT VI, SECTION B, LINE 11B:		
A COPY OF TH	E 990 FORMS WILL BE REVIEWED BY EXTERNAL COUN	SEL, P	RESIDENT,
AND TREASURE	R PRIOR TO BEING FILED.		
FORM 990, PA	RT VI, SECTION B, LINE 12C:		
OFFICERS AND	DIRECTORS ARE REQUIRED TO SIGN A STATEMENT W	HEN TH	EY JOIN THE
BOARD THAT T	HEY HAD REVIEWED THE CONFLICT OF INTEREST POL	ICY AN	D WILL
DISCLOSE ANY	CONFLICTS IF THEY ARISE. TRANSACTIONS WITH	INTERE	STED PARTIES
ARE EVALUATE	D BY INDEPENDENT DIRECTORS USING INFORMATION	REGARD	ING WHAT
SIMILAR ORGA	NIZATIONS PAY FOR SIMILAR SERVICES.		
FORM 990, PA	RT VI, SECTION C, LINE 19:		
DOCUMENTS RE	QUIRED BY LAW TO BE DISCLOSED ARE MADE AVAILA	BLE UP	ON REQUEST.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

28 2016.05050 45COMMITTEE, INC.

Schedule R (Form 990) 2016	Schedule R (s for Form 990.	For Paperwork Reduction Act Notice, see the Instructions for Form 990.
×		N/A	527	VIRGINIA 52	POLITICAL ORGANIZATION	FUTURE45 - 47-3479543 P.O. BOX 710993 HERNDON, VA 20171
(g) Section 512(b)(13) controlled entity? Yes No	(f) Direct controlling entity	(e) Public charity Status (if section 501(c)(3))	(d) Exempt Code Pu section statt	(c) Legal domicile (state or foreign country)	(b) Primary activity	
npt	ore related tax-exer	se it had one or m	Part IV, line 34 becau	answered "Yes" on Form 990, I	tions. Complete if the organization	Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.
(f) Direct controlling entity		(e) End-of-year assets	(d) Total income	(c) Legal domicile (state or foreign country)	(b) Primary activity	(a) Name, address, and EIN (if applicable) of disregarded entity
				" on Form 990, Part IV, line 33.	e if the organization answered "Yes	Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 30
ation number 8 7	Employer identification number $47 - 3803487$				INC.	Name of the organization 45COMMITTEE, I
Open to Public Inspection	-05		vww.irs.gov/form990.	90) and its instructions is at w	► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.	Department of the Treasury Internal Revenue Service
2016	OM	37.	rtnerships line 33, 34, 35b, 36, or 37.	Lions and Unrelated Part vered "Yes" on Form 990, Part Ⅳ, lin ► Attach to Form 990.	■ Complete if the organization answered "Yes" on Form 990, Part IV, I ■ Attach to Form 990.	SCHEDULE R (Form 990)

632161 09-06-16 LHA

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990) 2016	Schedule R (Form 990) 2016	Schedul					30				632162 09-06-16
(i) Section 512(b)(13) controlled entity? Yes No	(h) Percentage ownership	(g) Share of Pe end-of-year ov assets		(f) Share of total b, income	(e) Type of entity (C corp, S corp, or trust)	(d) Direct controlling entity	(c) Legal domicile (state or foreign country)	(b) Primary activity	Primi	⊐ z	(a) Name, address, and EIN of related organization
erelated	one or more	on Form 990, Part IV, line 34 because it had one or more related	art IV, line 34	Form 990, P.	/ered "Yes" on F	organization answ	omplete if the	oration or Trust. Co /ear.	as a Corpc ng the tax y	ganizations Taxable rporation or trust duri	Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" organizations treated as a corporation or trust during the tax year.
									oconiu y /		
Percentage ownership	managing partner?	20 of Schedule	tions?	Share of end-of-year assets	income en		Predominant income (related, unrelated, excluded from tax under sections 512-514)	Direct controlling entity	domicile (state or foreign	Primary activity	Name, address, and EIN of related organization
(k)		(i)	(h)	(g)			(e)		(c)	(a)	(a)
	ore related	on Form 990, Part IV, line 34 because it had one or more related	34 because	, Part IV, line		ion answered "Ye	the organizat	ership. Complete if	as a Partn ax year.	ganizations Taxable rtnership during the t	Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes organizations treated as a partnership during the tax year.
Page 2	03487	47-3803487							INC.	45COMMITTEE, IN	Schedule R (Form 990) 2016 45 CO:

30) 2016	(Form 99	Schedule R (Form 990) 2016		31	632163 09-06-16
					(6)
					(5)
					(4)
					(3)
					(2)
					(1)
	lved	(d) Method of determining amount involved	(c) Amount involved	(b) Transaction type (a-s)	(a) Name of related organization
		lationships and transaction thresholds.	nis line, including covered re	vho must complete th	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
X	1s				
X	t.				r Other transfer of cash or property to related organization(s)
×	1q				q Reimbursement paid by related organization(s) for expenses
×	1p				p Reimbursement paid to related organization(s) for expenses
>	10				o Sharing of paid employees with related organization(s)
< ▷	H			ion(s)	n Snaring of facilities, equipment, mailing lists, or other assets with related organization(s)
< ×				Inization(s)	_
+	11 X				I Performance of services or membership or fundraising solicitations for related organization(s)
×	+			•	k Lease of facilities, equipment, or other assets from related organization(s)
	3				
×	<u></u> :				i Lease of facilities equipment or other assets to related organization(s)
×	≓ :				
×	th Ig				 g sale of assets from related organization(s)
×	2				
×	≠				f Dividends from related organization(s)
×	1e				e Loans or loan guarantees by related organization(s)
×	1d				d Loans or loan guarantees to or for related organization(s)
×	1c				c Gift, grant, or capital contribution from related organization(s)
×	1b				b Gift, grant, or capital contribution to related organization(s)
×	1a			/	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
		Parts II-IV?	lated organizations listed ir	s with one or more re	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
s No	Yes	1			Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.
		r 36.	1990, Part IV, line 34, 35b, or 36	wered "Yes" on Form	Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV,

Schedule R (Form 990) 2016 45COMMITTEE, INC.

47-3803487 Page 3

Schedule R (Form 99	
0) 2016 4	
5 COMMITTEE,	
INC.	

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

990) 2016	{ (Form	Schedule R (Form 990) 2016								
(k) ercentage ownership	(J) General or P managing partner? Yes No	(h)(i)(j)(k)Dispropor- tionate allocations?Code V-UB1 amount in box 20 partner?General or Percentage managing partner?Yes No(Form 1065)Yes No	(h) Dispropor- tionate allocations? Yes No	(g) Share of Dist end-of-year allo assets Ye	(f) Share of total income	(e) Are all 501(c)(3) Yes No	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(c) Legal domicile (state or foreign country)	(b) Primary activity	(a) Name, address, and EIN of entity
						•	estment partnerships.	usion for certain inv	structions regarding excl	that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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Schedule R (Form 990)	2016 45COMMITTEE ,	INC.	47-3803487 Page 5
Part VII Suppler	nental Information.		<u> </u>
	Iditional information for responses to que	stions on Schedule R. See instructions.	
632165 09-06-16		33	Schedule R (Form 990) 2016

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile*, click on Charities & Non-Profits, and click on *e-file* for *Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identifyi	ng number
Type or print	Name of exempt organization or other filer, see instr	uctions.		Employe	r identificatio	on number (EIN) or
•	45COMMITTEE, INC.				47-38	03487
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, P.O. BOX 710993	see instruc	tions.	Social se	curity numb	er (SSN)
instructions.	City, town or post office, state, and ZIP code. For a HERNDON, VA 20171	foreign add	Iress, see instructions.			
Enter the	Return Code for the return that this application is for (f	ile a separa	ate application for each return)			0 1
Applicat	on	Return	Application			Return
Is For		Code	Is For			Code
Form 990) or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (individual)	03	Form 4720 (other than individual)			09
Form 990)-PF	04	Form 5227			10
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above) MARIA WOJCIECH	06	Form 8870			12
Teleph If the of If this box 1 I re for	books are in the care of \blacktriangleright P.O. BOX 71099 hone No. \blacktriangleright 832-236-3994 borganization does not have an office or place of busines is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box \blacktriangleright quest an automatic 6-month extension of time until the organization named above. The extension is for the calendar year or X tax year beginning <u>APR 1, 2016</u> he tax year entered in line 1 is for less than 12 months,	ss in the Ur t Group Exe and atta FEBR e organizati	Fax No. ►	f this is fo f all memb	r the whole opers the extension of the e	group, check this nsion is for.
	Change in accounting period			Final retur	n I	
	his application is for Forms 990-BL, 990-PF, 990-T, 4720	0, or 6069,	enter the tentative tax, less any			0
	nrefundable credits. See instructions.			3a	\$	0.
	his application is for Forms 990-PF, 990-T, 4720, or 606	,	<i>,</i>			0
	imated tax payments made. Include any prior year over			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include your p	-				0.
	using EFTPS (Electronic Federal Tax Payment System)			<u>3c</u>	\$	
instruction:	If you are going to make an electronic funds withdrawans.	ai (direct de	Dit) with this Form 8868, see Form 8	i453-EO ai	na Form 887	9-EO for payment
LHA F	or Privacy Act and Paperwork Reduction Act Notice	e, see instr	uctions.		Form 8	8868 (Rev. 1-2017)

Form **8868** (Rev. January 2017)

Department of the Treasury

Internal Revenue Service

OMB No. 1545-1709

Exhibit B

			MUR/48600080			
			** PUBLIC DISCLOSURE COPY)	OMB No. 1545-0047
_	Q	90	Return of Organization Exempt Fro			
Forr	n 🥑	50	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod	-		
		of the Treasury nue Service	 Do not enter social security numbers on this form as it Information about Form 990 and its instructions is at w 	-	-	Open to Public Inspection
					AR 31, 2016	
	heck if		f organization	<u> </u>	D Employer identifi	
a	pplicab	le:			,,,	
	Addre	e 4300	MMITTEE, INC.			
X	Name Chang		usiness as		47-3	803487
X	Initial return			n/suite	E Telephone numbe	
	Final return termir	<u></u>	BOX 710993			236-3994
	ated]Amen	ded נודטא מפל נודטא	own, state or province, country, and ZIP or foreign postal code IDON , VA 20171		G Gross receipts \$	2,263,000.
	_lreturn]Applio		nd address of principal officer:MARIA WOJCIECHOWSKI		H(a) Is this a group re	eturn s? Yes X No
	⊥tiòn pendi		AS C ABOVE		H(b) Are all subordinates in	
I T	ax-ex	empt status:	501(c)(3) X $501(c)(4) < (insert no.)$ 4947(a)(1) or	527		list. (see instructions)
			MMITTEE • COM		H(c) Group exemptio	,
				Year c		VI State of legal domicile: VZ
	irt I	Summary	,		·	
ė	1	Briefly describ	be the organization's mission or most significant activities: ADVOCAT	E F	OR REFORMS	AND
Activities & Governance			NS ON A WIDE RANGE OF PUBLIC POLICY			
ern			In ► ☐ if the organization discontinued its operations or disposed o	f more		
30			ting members of the governing body (Part VI, line 1a)		6	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			dependent voting members of the governing body (Part VI, line 1b)			
ties			of individuals employed in calendar year 2015 (Part V, line 2a)			
tivi			of volunteers (estimate if necessary)			0.
Ac			d business revenue from Part VIII, column (C), line 12 business taxable income from Form 990-T, line 34			0.
		Net unrelated		<u></u>	Prior Year	Current Year
Ø	8	Contributions	and grants (Part VIII, line 1h)		ind ida	2,225,000.
nue			ice revenue (Part VIII, line 2g)			0.
Revenue		•	come (Part VIII, column (A), lines 3, 4, and 7d)			0.
£			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)			2,225,000.
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)			655,000.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)			0.
es			r compensation, employee benefits (Part IX, column (A), lines 5-10) $\ldots$			0.
ens			undraising fees (Part IX, column (A), line 11e)			0.
Expenses			ing expenses (Part IX, column (D), line 25)			252 400
			es (Part IX, column (A), lines 11a-11d, 11f-24e)			353,489. 1,008,489.
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)			1,216,511
3C	19	Revenue less	expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
t Assets or Id Balances	20	Total assets (	Part X, line 16)		ginning of ourrent rear	1,216,511
Ass Ba	21	-	s (Part X, line 26)			0,
Fund			fund balances. Subtract line 21 from line 20			1,216,511.
	irt II					· · · · · · · · · · · · · · · · · · ·
Unde	er pena	alties of perjury,	I declare that I have examined this return, including accompanying schedules and	stateme	ents, and to the best of m	ly knowledge and belief, it is
true,	correc	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which pr	reparer	has any knowledge.	
			f - f ⁰			
Sig	n	· ·			Date	
Her	е		A WOJCIECHOWSKI, TREASURER print name and title			
		Type of			ate laws [	

	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	RENAE DUNCAN	Keriae Duncan CPA	2/16/17	self-employed P01257722
Preparer	Firm's name 🕨 ATCHLEY & ASSOCI		Firm's	EIN <b>74-2920819</b>
Use Only	Firm's address ▶ 1005 LA POSADA D	DRIVE		
	AUSTIN, TX 78752		Phone	no.(512)346-2086
May the IF	RS discuss this return with the preparer shown ab	ove? (see instructions)		X Yes No
				- 000

532001 12-16-15 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2015)

Form	<b>45COMMITTEE</b> , <b>INC</b> .	47-3803487	Page <b>2</b>
	rt III Statement of Program Service Accomplishments		<u>90 —</u>
	Check if Schedule O contains a response or note to any line in this Part III		🔲
1	Briefly describe the organization's mission: 45COMMITTEE IS AN ORGANIZATION DEVOTED TO PROMOTING SO		3
	ISSUES THAT CONFRONT THE UNITED STATES DURING THE 45TH		
	TERM. TO THAT END, 45COMMITTEE WILL ADVOCATE FOR REFORM ON A WIDE RANGE OF PUBLIC POLICY ISSUES.	MS AND SOLUTIO	SN2
2	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ?	Yes	XNo
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services	s? Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot		
	revenue, if any, for each program service reported.		lina
4a	(Code: ) (Expenses \$ 655,000. including grants of \$ 655,000. ) (Rev		)
	PROVIDED GRANTS TO OTHER 501(C)(4) ENTITIES ENGAGED IN IN THE PUBLIC POLICY AND FOREIGN POLICY ARENAS.	ISSUE ADVOCAC	CY
	IN THE FOBLIC FOLICI AND FOREIGN FOLICI ARENAS.		
4b	(Code:) (Expenses \$ including grants of \$) (Rev	venue \$	)
4c	(Code:) (Expenses \$ including grants of \$) (Rev	renue \$	)
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses <b>655</b> ,000.	· ·	
53200	12	Form <b>9</b> 9	<b>90</b> (2015)
12-16-			
	4		

18320216 796448 06784 2015.05040 45COMMITTEE, INC.

		803487	P	age <b>3</b>
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			v
-	If "Yes," complete Schedule A		X	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		x	
4	public office? <i>If "Yes," complete Schedule C, Part I</i> Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in e			
4	during the tax year? If "Yes," complete Schedule C, Part II			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III			x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, P			x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV			X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permar			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V			X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or as applicable.	X		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule L	),		
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX			XX
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e		
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	4.45		x
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	<u>11f</u>		
128		12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
5	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?			Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busines			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,00	0		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		<b> </b>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
46	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i>			x
	complete Schedule G, Part III	19		- 12

Form **990** (2015)

532003 12-16-15

Part IV Checklist of Pequired Schedules (continued)         Yes         No           20a Dd the organization operate or eor mon hospital facilities? // Yes, "complete Schedule H         Zob         Zob <td< th=""><th></th><th>990 (2015) <b>45COMMITTEE</b>, INC. <b>47-380</b></th><th>3487</th><th>Р</th><th>age <b>4</b></th></td<>		990 (2015) <b>45COMMITTEE</b> , INC. <b>47-380</b>	3487	Р	age <b>4</b>
20a         Did the organization operate one or more hospital facilities // Yes," complete Schedule // Part //	Pa	t IV Checklist of Required Schedules (continued)			
II "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?         20b           ID bit the organization report more than \$3:000 of grants or other assistance to any domestic organization or domestic granument on Part IK, colum (A), line 17 II" (Pies, complete Schedule / Part II)         X           ID the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization aurent and former offices, directors, tustees, key employees, and highest compensated employees? If "Sec." complete Schedule / Part II.         X           ID the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensated on provee? If "Yes", complete Schedule / Part II.         X           ID the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensated on provee? If "Yes", complete Schedule / Part II.         X           ID the organization have a taxesempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 2/b through 2/b and complete Schedule / Part I.         Z4d           ID do the organization invest any proceeds of tax essempt bond issue of the organization and as an 'on behalf of issue for bonds outstanding at any time during the year?         Z4d           ID about enginetation engage in an accebus account other than a refunding section was any state deflease any taxeewinpt bends?         Z4d           ID about enginetation engage in an section bend and the anged in an accebus account on the adsistance to any or 90 02D III "Yes," complete Schedule L, Part I         Z5a				Yes	No
21         Del the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 11 H "Ves," complete Schedule I, Parts I and II         21         X           22         Del the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 H "Ves," complete Schedule I, Parts I and II         22         X           23         Did the organization nerve "Ves" to Part IV, lisc to A, line 34, or 6 shout compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees 17 M "Ves," complete Schedule J         22         X           24         Did the organization narve stase exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the yaor, that was issued after Docember 31, 20027 II "Ves," answer lines 24b bincuigh 24d and complete Schedule K. II "No", do to line 25a         24a         X           25         Did the organization maintain an escrow account other than a refunding strong part devecation?         24d         X           26         Did the organization acts as an "on behal of" issuer for bonds outstanding at any time during the year?         24d         X           27         Did the organization acts as an "on behal of" issuer for bonds outstanding it any time during the year?         24d         X           28         Section 50 (L(c)R) organizations, part or year)         25d         X           28 <th><b>20</b>a</th> <th>Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H</th> <th>20a</th> <th></th> <th>Х</th>	<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
domestic government on Part IX, column (A), line 17 /f Yes, 'complete Schedule I, Part I and II.     21     X       22     Dot the organization report methan 55,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 /f Yes, 'complete Schedule I, Parts I and III.     22     X       23     Did the organization narwer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former offices, directors, trustess, key employees, and higher to compensate demployees? If 'Yes,' complete Schedule I, 'Parts I and III.     23     X       24     Did the organization narwer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensate on provide schedule I, Part I and III.     24     X       25     Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception?     240     240       26     Did the organization nivest any proceeds of tax-exempt bonds beyond a temporary period exception?     240     241       26     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? /f Yes,' complete Schedule I, Part I     25a       26     Det the organization report any amount on Part X, line 5, 6, or 22 for reackables from or payables to any current or former officer, director, trustee, or key employees, highest complexes Schedule L, Part IV     25a       27     X       28     Was the organization averant the regularization sprite Schedule L, Part IV     25a       29 <th>b</th> <th>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</th> <th>20b</th> <th></th> <th></th>	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
22       Det the organization report more than \$5,000 of gents or other assistance to or for domestic individuals on Part K, column (A), line 21 /f 'Ves,' completes Schedule /, Parts I and III       22       X         23       Det the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J       22       X         24       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, fatt was siscued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'Wo', go to line 25a       X         25       Did the organization maintain an escrow account other than a refunding escrow at any time during the year if the sist any to the sequent bond's super of the organization anayse in the 1 disqualified person in a proy year. The sist and the sequent is a secret benefit transaction with a disqualified person and the year if 'Yes,' complete Schedule L, Part I       25a         25       Section \$01(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization anayse in a secress benefit transaction with a disqualified person and the present in a proy year. and that the transaction with a disqualified person and the year if 'Yes,' complete Schedule L, Part I       25a       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employees, cubstantial controbutor of range indicaton reproved as grant or other assistance to an	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX, column (A), line 27. If "Yes," complete Schedule I, Parts I and III.     22     X       23     Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, If "No", g of Ume 25a     2a     X       24     Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, If "No", g of Ume 25a     24a     X       25     Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24a     X       26     Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24d     X       26     Did the organization and at an an encore account other than a refunding escrow at any time during the year?     24d     X       27     Did the organization and the firsuler for bonds outstanding at any time during the year?     24d     X       28     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction tax the necess benefit transaction with a disqualified person of a prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II     25b     X       27     Did the organization any orun or therat X, line 5, 6, or 22 for receivables from or payables		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
23       Did the organization answer 'Yes' to Part VII, Saction A, line 3, 4, or 5 about compensated employees? If 'Yes, "complete Schedule J.       23         24       Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was proceeds of tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was proceeds of tax exempt bonds beyond a temporary period exception?       240         24       Did the organization names are supproceeds of tax exempt bonds beyond a temporary period exception?       240         25       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?       24d         26       b the organization negating and the general during the year?       24d         27       Z4d       Z4d         28       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Dut the organization engage in an excess benefit transaction with a disqualified person in a prory exit, and that the transaction has not been reported on any of the organization's prory forms 990 or 900-E27 If 'Yes,' complete Schedule L, Part I       25b       X         27       Did the organization orport any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, furetors, trustees, exit, exit, Pris, "complete Schedule L, Part IV       26b       X         28       Max the organization provid a grant or other assistance to an officer, dir	22				
and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes," complete     23     X       24a     Do the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes," answer lines 24b through 24d and complete     X       24a     Do the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24a     X       b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24d     X       c Did the organization and at an encore account other than a refunding escrow at any time during the year?     24d     X       25a     Section 50(c)(3), 50(c)(4), and 50(c)(2) organizations. Did the organization are than a temporary period exception?     24d     X       25a     Section 50(c)(3), 50(c)(4), and 50(c)(2) organizations. Did the organization are than a temporary period exception?     24d     X       25a     Did the organization are that that tengage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an enter member, or a 35% controlled entity or family member of a correct any anabula concommitter emember, or a 35% controlled entity or family member of a correct any anabula concommitter emember, o			22		X
Schedule J     23     X       24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", to to line 25a     24a     X       24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24b     24a     X       25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization with a disqualified person during the year?     24d     24d     X       25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization with a disqualified person during the year? If "yes," complete Schedule L, Part I     25a     X       25a Did the organization part of the network of the organization's prior Form 590 or 590-CE? If "Yes," complete Schedule L, Part I     25a     X       25a Did the organization organization or part and that the transaction has not been reported on any of the organization's prior Form 590 or 590-CE? If "Yes," complete Schedule L, Part I     25a     X       25a Did the organization organization organizations prior Form 590 or 590-CE? If "Yes," complete Schedule L, Part II     25a     X       25a Did the organization prior draw amount on thert X, line 5, 6, or 22 for receivables form or payabiles to any current or former officer, director, trustee, or key employee or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV     25a     X       25a Did the organization neevice contributions of if	23				
24a       Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule L, I'Wo', or of line 25a       24b         24b       Did the organization minimum an escrox occurat other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24b       24b         24b       Did the organization matteria an escrox occurat other than a refunding escrow at any time during the year?       24c       24c         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization in a locaulified person in a prior year, and that the transaction with a disqualified person during the year?       25a       X         25b       Did the organization area that 1 engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with an excess hear than association is prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I       25a       X         25b       Did the organization area that 1 engaged in an excess benefit transaction with an elevalubit persons? If 'Yes," complete Schedule L, Part II       25a       X         27b       Did the organization area that 1 engaged in an excess benefit transaction with an elevalubit persons? If 'Yes," complete Schedule L, Part II       25a       X         27b       Did the organization area that engaged in an excess benefit transaction with an elevalubit persons? If 'Yes," complete Schedule L, Part II <t< th=""><th></th><th></th><th></th><th></th><th>37</th></t<>					37
Is tay of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete     X       Schedule K. If No', go to line 25a     24b       D lid the organization maintain an escrow account other than a refunding escrew at any time during the year to defease any tax-exempt bonds?     24b       D lid the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?     24d       25a     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a provement and that the transaction with a disqualified person in a provement or former officers, directors, trustes, key employees, highest compressed benefit transaction with a been reported on any of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustes, key employees, indirector, trustes, key employees, prise forms 990 or 980-E27 If "Yes," complete Schedule L, Part II       27     X       28     Was the organization provide a grant or other assistance to an officer, director, trustes, key employees, bried station or former officer, director, trustes, or key employee? If "Yes," complete Schedule L, Part IV       28     Was the organization provide a grant or other assistance to an officer, director, trustes, ery employee?       29     Ka       20     Maint the secret or former officer, director, trustes, or key employee? If "Yes," complete Schedule L, Part IV       29     Na current or former officer, director, trustes, or key employee? If "Yes," complete Schedule L, Part IV	• •	Schedule J	23		
Schedule K. If "No", go to line 25a     24a     X       b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?     24b     24b       c Did the organization anitatin an secrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?     24c     24c       25a Section SO1(c)(3), SO1(c)(4), and SO1(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     24d     X       b Is the organization act as an "on behalf Of issuer for bonds outstanding at any time during the year?     24d     X       b Is the organization act as an "on behalf Of issuer for bonds outstanding at any time during the year?     24d     X       b Is the organization act as an "on behalf Of issuer for bonds outstanding at any time during the year?     24d     X       b Is the organization act as an "on behalf Of issuer for bonds outstanding at any time during the year?     24d     X       b Is the organization act as an "on behalf Of issuer for bonds outstanding at any time during the year?     24d     X       c Morganization act as an "on behalf Of issuer for bonds behalf of issuer for bonds outstanding at any time during the year?     24d     X       c Morganization act as an "on behalf Of issuer for bonds behalf of person in a prior year, and that the transaction with a disqualified person?     25a     X       c Morganization report any amount on Part X, line 6, 6, or 22 for receivables form or payables to any curent or former officers, d	24a				
b       Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?       24b         c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24c         d       Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24d         25a       Section 501(c)31, 501(c)4), and 501(c)(29) organizations. Did the organization enagoes benefit transaction and the tase the transaction has not been reported on any of the organization or payables to any current or former officers, furstlese, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part I       25a         25D       Did the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II       26       X         26       A current or former officer, director, trustee, or key employee. Substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         27       X       Did the organization provide and the secure or key employee (or a family member thereol) was an officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X			04-		v
c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization are gage in an excess benefit transaction with a disqualified person output degrad that the transaction make any time during the year // Yes, "complete Schedule L, Part I       25a       X         25b       Is the organization account of the regarization sprice Forms 990 or 990-E27 // Yes," complete Schedule L, Part I       25a       X         25c       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes," complete Schedule L, Part I       26       X         27       Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part II)       27       X         28       A current or former officer, director, trustee, or key employee? If 'Yes," complete Schedule L, Part IV       28a       X         29       Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         28       A current or former officer, director, trustee, or key employee? If 'Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive womer that SSC 000 in non cash corhibutions? If 'Yes," complete Schedule L, P	h				
any tax-exempt bonds?       24c         d Did the organization act as n'on behaft of "issuer for bonds outstanding at any time during the year?       24d         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? // "Yes," complete Schedule L, Part I       25a         b Is the organization avare that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction to been reported on any of the organization prior Forms 990 or 990-E27 // 'Yes," complete Schedule L, Part I       25b       X         26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes," complete Schedule L, Part II       26       X         27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part IV       27       X         28 Was the organization prove of fine-chry trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         29 Did the organization receive more than \$25,000 in non cash contributions? If 'Yes,' complete Schedule L, Part IV       28b       X         29 Did the organization receive more than \$25,000 in non cash contributions? If 'Yes,' complete Schedule L, Part I       <			240		
d Did the organization act as an "on behalf of "issuer for bonds outstanding at any time during the year?       24d         25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? II "Yes," complete Schedule L, Part I       25a       X         b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person and been reported on any of the organization's prior Forms 930 or 990-E27 If "Yes," complete Schedule L, Part I       25b       X         26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, nighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV       27       X         28 was the organization applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member th	C		240		
25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         25b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I       25b       X         26       Did the organization aware that it engaged in an excess benefit transaction with a disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization aware that it engaged in a process barget of the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization aware officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," com	Ь				
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I       25b       X         26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, directors, trustees, key employees, nighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27 Did the organization aport on the assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or tamily member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions);       28a       X         29 Did the organization receive more tifteer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29 Did the organization receive contributions? If "Yes," complete Schedule M       29       X         20 Did the organization receive control trustee, or key employee? If "Yes," complete Schedule M       29       X         20 Did the organization receive control trustee, or key emp			24u		
b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 E27.11 "Yes," complete Schedule L, Part I       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, furstees, key employees, highest compensated employees, or disqualified persons?11"Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons?11" Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28a       X         29       A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or lev employee (or a family member thereof) was an officer, director, trustee, or omplete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions?11"Yes," complete Schedule M       29       X         30       Did the organization inguidate, terminate, or dissolve and cease operations?11"Yes," complete Schedule R, Part I       30 <th>200</th> <td></td> <td>25a</td> <td></td> <td>x</td>	200		25a		x
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization provide a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than 250.000 in no-cash contributions? If "Yes," complete Schedule L, Part IV       29a       X         30       Did the organization receive more than 250.000 in no-cash contributions? If "Yes," complete Schedule M       30a       X         31       Did the organization receive more than 250.000 in no-cash contributions? If "Yes," complete Schedule M       30a       X         32       Did the organization sel, exchange	b		200		
Schedule L, Part I       25b       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule M. Part I       30       X         31       Did the organization neceive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule A, Part I       30       X         32       Did the organization includate, terminate, or dissolve and cease operations					
26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, nighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in on cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part II       30       X         31       Did the organization receive andribuiding thereinate, or dissolve and cease operations? If "Yes," complete Schedule M, Part I       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule		Schoolula L. Dart I	25b		х
complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.       29a       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30a       X         31       Did the organization cown 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       31a       X         33       Did the organization heave a controlled entity within the meaning of section 512(b)(13)?       35a <td< th=""><th>26</th><th></th><th></th><th></th><th></th></td<>	26				
27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28       X       28       X         a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization inquidate, terminate, or disolve and cease operations? If "Yes," complete Schedule M       29       X         30       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       31       X         31       Did the organization nealed to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I       33       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I <td< th=""><th></th><td>former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"</td><td></td><td></td><td></td></td<>		former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive on former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       29       X         30       Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I       30       X         31       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete Schedule N, Part II       33       X         33       Did the organization oreal do any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         34       Was the organization head to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, ine 2       356       X		complete Schedule L, Part II	26		X
of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       28       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         31       Did the organization incide terminate, or dissolve and cease operations?       If "Yes," complete Schedule M       30       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?If "Yes," complete       33       X         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ime 1       34       X         35a       Did the organization selid, econsinity disregarded as separate from the organ	27				
28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       Image: Content of Schedule L, Part IV         a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N       30       X         31       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I       30       X         32       Did the organization sechange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a       Did the organization					
instructions for applicable filing thresholds, conditions, and exceptions):       28a       X         a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       30       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I       31       X         33       Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         34       Was the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         35       Did the organization have a controlled entity within th			27		X
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38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?         Note. All Form 990 filers are required to complete Schedule O       38	31		07		y
Note. All Form 990 filers are required to complete Schedule O	20		31		
	30		38	x	
					(2015)

532004 12-16-15

Form	990 (2015) <b>45COMMITTEE</b> , INC.		47-3803	487	P	age <b>5</b>
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	7			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable ga	ıming			
	(gambling) winnings to prize winners?			1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		1			
3a				3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		r			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		Х
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FB	BAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		r	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		r	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		r			
	any contributions that were not tax deductible as charitable contributions?	-		6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contribut		r			
	were not tax deductible?	-		6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	vices provide	d to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899 as	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation file a Fo	orm 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by the				
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
				14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b		

Form **990** (2015)

532005 12-16-15

a Enter the number of voting members of the governing body at the end of the tax year		990 (2015) 45COMMITTEE, INC. t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	nrough	47-3803 7b below, and for a			Pac nse
ction A. Governing Body and Management         a Enter the number of voting members of the governing body at the end of the tax year       Image an entert the number of voting members included in line 1a, above, who are independent       Image an entert the number of voting members included in line 1a, above, who are independent       Image and the source investment of the governing body at the end of the tax year         by delagated bread autority to an executive committee or similar committee, explain is Schedule 0.       Image and the source investment of the governing body?         b Are any governance decisions of the governing of the governing body?       Image and governing body?       Image and governing body?       Image and governing body?         b Coh or ganziation have write governing body?       Image and governing body?       Image and governing body?       Image and governing body?         b Are any governance decisions of the governing body?       Image and governing body?       Image and governing body?       Image and							
Enter the number of voting members of the governing body at the end of the tax year     If there are material differences in voting rights among members of the governing body, of the governing body     depated broad authority to an executive committee or sublar committee, orplain in Schedule 0.     Defare the number of voting members included in line 1a, above, who are independent     Defary officer, director, rustee, or key employees taxe a tamily relationship or a business relationship with any other     difficer, director, rustee, or key employees taxe a tamily relationship or a business relationship with any other     difficer, director, rustee, or key employees taxe a management duties customarily performed by or under the direct supervision     d of ficer, director, rustee, or key employees taxe a management duties customarily performed by or under the direct supervision     d of ficer, director, set, suscess, or key employees taxe a management duties customarily performed by or under the direct supervision     d of ficer, director, set, suscess, or key employees taxe and supervision     d of ficer, director, set, suscess, or key employees taxe and supervision     d of ficer, director, set, suscess, director, or a significant duversion of the organization is assets?     d bit de organization have members, stockholders, or     presons dher than the governing body?     do the organization have members, stockholders, or     presons dher than the governing body?     do the organization number of the governing body?     dis the organization numbers, intermation subult policies nor required by the following:     a large defared, effector, rustee, or key employees lated in Part VII, Section A, who cannot be reached at the     organization have local chapters, branches, or affiliate?     dis the organization have written policies and procedures governing the activities of such chapters, affiliates,     do bit organization have written policies and procedures governing the activities of such chapters, affilia		Check if Schedule O contains a response or note to any line in this Part VI					
a Enter the number of voting members of the governing body at the end of the tax year	ec						_
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bdd deigateb invad authority to an executive committee or similar committee, explain in Schedule 0.       Ib         bd any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person?       2         bd the organization delegate control over management duties customarily performed by or under the direct supervision of officers, director, trustee, or key employees to a management company or other person?       3         bd the organization become aware during the year of a significant diversion of the organization's assets?       6         bd the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?       7a         a National contemporaneously document the meetings held or written actions undertaken during the year by the following:       8b X         b Each committee with authority to at on behalf of the governing body?       8a       X         b Each committee with authority to at on behalf of the governing body?       8a       X         b Each committee with authority to at on behalf of the governing body?       8a       X         b Each committee with authority to at on behalf of the governing body?       8a       X         b Each committee with authority to at on behalf of the governing body?       8a       X         b Clot the organization have local chapters, branches, or affiliates?       10a       10a     <	1a		<b>1</b> a	t	2		l
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c       Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe       12         in Schedule O how this was done       12       X         Did the organization have a written whistleblower policy?       13       X         Did the organization have a written document retention and destruction policy?       14       X         Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?       15a         a       The organization's CEO, Executive Director, or top management official       15a         b       Other officers or key employees of the organization       15b         if "Yes," did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?       16a         b       If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?       16b         ctint C. Disclosure       Its the states with which a copy of this Form 990 is required to be filed							╉
in Schedule O how this was done       12c       X         Did the organization have a written whistleblower policy?       13       X         Did the organization have a written document retention and destruction policy?       14       X         Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?       14       X         a The organization's CEO, Executive Director, or top management official       15a       15b       15b         b Other officers or key employees of the organization       15b       15a       16b       16a       16b       16b       16a       16					12b	~	╉
Did the organization have a written whistleblower policy? 13   Did the organization have a written document retention and destruction policy? 14   Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 14   a The organization's CEO, Executive Director, or top management official 15a   b Other officers or key employees of the organization 15b   if "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions). 16a   a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a   b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b   ction C. Disclosure List the states with which a copy of this Form 990 is required to be filed	С		es," de	escribe		v	
Did the organization have a written document retention and destruction policy?       14       X         Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?       14       X         a The organization's CEO, Executive Director, or top management official       15a       15a         b Other officers or key employees of the organization       15b       15b         If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).       16a       16a         a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?       16a       16b         b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?       16b         ction C. Disclosure       16b       16b       16b         List the states with which a copy of this Form 900 is required to be filed ▶ NONE       16b       16b         cerion 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990.T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.       00hor (explain in Schedule O)       0escribe in Schedule O whether (and if so, how)	_						╉
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State the name, address, and telephone number of the person who possesses the organization's books and records:          MARIA WOJCIECHOWSKI - 832-236-3994         P.O. BOX 710993, HERNDON, VA 20171         006 12-16-15	9		onflict o	f interest policy, an	ıd finan	cial	
MARIA WOJCIECHOWSKI - 832-236-3994 P.O. BOX 710993, HERNDON, VA 20171 DOG 12-16-15 Form 990	_						
P.O. BOX 710993, HERNDON, VA 20171           D06 12-16-15         Form 990	0		ooks an	d records:			_
D06 12-16-15 Form <b>990</b>							
					-	0000	_
0		12-16-15			Form	990	• (
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Form 990 (2	015) 45COMMITTEE, INC.	47-3803487	Page 7							
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
	Employees, and Independent Contractors									
	Check if Schedule O contains a response or note to any line in this Part VII									
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (Ď), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Т

(A) Name and Title	(B) Average hours per	(do box	not c , unle	(C Pos heck	<b>C)</b> ition more rson		one h an	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) BRIAN O. WALSH CHAIRMAN & PRESIDENT	10.00	x		x				0.	0.	0.
(2) BRIAN BAKER	4.00									
DIRECTOR		x						0.	0.	0.
(3) SARA FAGEN	4.00									
DIRECTOR		x						0.	0.	0.
(4) RANDY SCHEUNEMANN	4.00									
DIRECTOR		Х						0.	0.	0.
(5) ROB COLLINS	4.00									
DIRECTOR	4 00	X						0.	0.	0.
(6) MATT WELL	4.00			v				0	0	0
SECRETARY	4.00	X		X				0.	0.	0.
(7) MARIA WOJCIECHOWSKI TREASURER	4.00			x				0.	0.	0.
TREASURER		-	-		-			0.	0.	0.
		1								
			-							
		1								
		1								
		-								
532007 12-16-15								1		Form <b>990</b> (2015)

Form **990** (2015)

7

	990 (2015) <b>45COMMIT</b>									47-3	803	487	Pa	age <b>8</b>
Par	t VII Section A. Officers, Directors, Trus (A) Name and title	<b>(B)</b> Average			(C Posi	<b>C)</b> ition	ı		Compensated Employe (D) Reportable	es (continued) (E) Reportable		Es	(F) stimate	ed
		hours per week (list any hours for related organizations below line)	tee or director	, unle	ss pe	rson irecto	Highest compensated signal with the set of t	n an		compensatic from related organization (W-2/1099-MIS	in I S	com fr org an	nount other pensa om th anizat d relat anizati	ttion e ion ed
			-											
			-											
			-											
			-											
	Sub-total								0.		0.			0.
	Total from continuation sheets to Part V Total (add lines 1b and 1c)								0.		0.			0.
2	Total number of individuals (including but r compensation from the organization	not limited to th	nose	liste	ed al	bove	e) wh	io r	eceived more than \$100	),000 of reportab	le			0
3	Did the organization list any <b>former</b> officer line 1a? If "Yes," complete Schedule J for s			e, ke	ey en	nplc	oyee,	or	highest compensated e	mployee on		3	Yes	No X
4	For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab 0,000? <i>If</i> "Yes,	le co " <i>co</i>	mple	ete S	Sche	edule	e J f	for such individual	-		4		X
5 Sec	Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," <i>con</i> <b>tion B. Independent Contractors</b>	-				-						5		X
1	Complete this table for your five highest co the organization. Report compensation for	-									npens	ation	from	
	(A) Name and business			ONE					(B) Description of s		С	<b>((</b> ompe	<b>c)</b> nsatio	n
2	Total number of independent contractors ( \$100,000 of compensation from the organ		iot li	mite	d to		se lis D	stec	d above) who received n	nore than				
	_											Form	<b>990</b> (2	2015)

532008 12-16-15

				MITTEE,	INC.			47-3803	487 Page 9
Pa	rt V	/111	Statement of Reven	ue					
			Check if Schedule O conta	ins a response	or note to any li	ne in this Part VIII			
						(A) Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
nts its	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
s, G			Fundraising events						
Gift lar			Related organizations			]			
imi			Government grants (contributio			]			
tion r S			All other contributions, gifts, grants						
ibu ⁻			similar amounts not included above	e 1f 2	,225,000.	,			
d O		g	Noncash contributions included in lines 1	a-1f: \$					
an Co			Total. Add lines 1a-1f			2,225,000.			
					Business Code	e			
e	2	а							
Program Service Revenue		b							
ด เ Senu		с							
ran lev		d							
rog		е							
Ā		f	All other program service reven	iue					
		g	Total. Add lines 2a-2f						
	3		Investment income (including c	lividends, inter	rest, and				
			other similar amounts)						
	4		Income from investment of tax-	exempt bond	proceeds				
	5		Royalties		<b>&gt;</b>				
				(i) Real	(ii) Personal	_			
	6		Gross rents			-			
			Less: rental expenses			-			
			Rental income or (loss)						
	_		Net rental income or (loss)		1				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other 38,000.	-			
			assets other than inventory		30,000	-			
		D	Less: cost or other basis		38,000.				
		_	and sales expenses		0.				
			Gain or (loss)			0.			
	0		Net gain or (loss) Gross income from fundraising						
Other Revenue	0	a	including \$	-					
evel			contributions reported on line 1						
r Re			Part IV, line 18	-					
the		b	Less: direct expenses			-			
0			Net income or (loss) from fundr			-			
			Gross income from gaming act	-					
			Part IV, line 19		ı				
		b	Less: direct expenses			-			
			Net income or (loss) from gamin						
	10	а	Gross sales of inventory, less r	eturns					
			and allowances	a	1				
		b	Less: cost of goods sold			]			
			Net income or (loss) from sales						
			Miscellaneous Revenue		Business Code				
	11	а							
		b							
		с							
			All other revenue						
		е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions.		►	2,225,000.	0.	0.	0.
53200	9 12	-16	-15						Form <b>990</b> (2015)

9 18320216 796448 06784 2015.05040 45COMMITTEE, INC.

45COMMITTEE, INC.

	t IX Statement of Functional Expense				
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		<b><i>CEE</i></b> 000		
	and domestic governments. See Part IV, line 21	655,000.	655,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	59,745.		59,745.	
b	Legal	86,827.		86,827.	
С	Accounting	10,775.		10,775.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	00 100		00 100	
	column (A) amount, list line 11g expenses on Sch 0.)	80,100.		80,100.	
12	Advertising and promotion				
13	Office expenses	6,687.		6,687.	
14	Information technology				
15	Royalties				
16	Occupancy	525.		525.	
17	Travel	545.		545.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19 00	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates Depreciation, depletion, and amortization				
22 23		9,593.		9,593.	
23 24	Insurance Other expenses. Itemize expenses not covered	5,555.		5,555.	
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. column (A)				
а	amount, list line 24e expenses on Schedule 0.) ´ POLITICAL ADVERTISING P	77,305.		77,305.	
a b	POLITICAL RESEARCH	21,696.		21,696.	
c b	BANK & FINANCE CHARGES	236.		236.	
d		2301		2000	
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,008,489.	655,000.	353,489.	0.
26	Joint costs. Complete this line only if the organization	_,,		,	
-0	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

532010 12-16-15

Form 990 (2015)

18320216 796448 06784

_____ if following SOP 98-2 (ASC 958-720)

Check here

10 2015.05040 45COMMITTEE, INC.

Form 990 (	2015)	45COMMITTEE,	INC.
Part X	Balance She	et	

	Check if Schedule O contains a response or note to any line in this Part			
		(A) Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing		1	1,216,511.
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Comple	te		
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined	under		
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and conti	buting		
	employers and sponsoring organizations of section 501(c)(9) voluntary			
<u>e</u>	employees' beneficiary organizations (see instr). Complete Part II of Sch	L	6	
	Notes and loans receivable, net		7	
≮ 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
b	Less: accumulated depreciation 10b		10c	
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		16	1,216,511
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trust			
	key employees, highest compensated employees, and disqualified perso			
	Complete Part II of Schedule L		22	
⁻ 23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part >	of		
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25			0
	Organizations that follow SFAS 117 (ASC 958), check here	and		
2	complete lines 27 through 29, and lines 33 and 34.			
27 28 29 20 2010 Datatuces 28 29 20 201 2010 2010 2010 2010 2010 2010	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
5	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0.	30	0
31	Paid-in or capital surplus, or land, building, or equipment fund			0
	Retained earnings, endowment, accumulated income, or other funds			1,216,511
33	Total net assets or fund balances		32	1,216,511
33	Total liabilities and net assets/fund balances			1,216,511
04	וטנמו וומטווונוסט מווע דוכן מטטבנט/זערוע שמומוועכט		04	Form <b>990</b> (201

Form **990** (2015)

532011 12-16-15

Form	1990 (2015) <b>45COMMITTEE</b> , INC.	47-38	03487	Page <b>1</b>	2
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI			🗆	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,225		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,008		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,216	5,511	•
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		0	•
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			_
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0	•
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				_
	column (B))	10	1,216	5,511	•
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			🗆	
				Yes No	>
1	Accounting method used to prepare the Form 990: 🛛 Cash 🗌 Accrual 🗌 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	,	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	J - · · · · · ·	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			_
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
				00 /00	_

Form **990** (2015)

532012 12-16-15 MUR748600092 ** PUBLIC DISCLOSURE COPY **

# Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Employer identification number

47-3803487

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Schedule B

Name of the organization

Organization type (check one):

#### 45COMMITTEE, INC.

Filers of:	Section:
Form 990 or 990-EZ	$\fbox$ 501(c)( $4$ ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note**. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

**X** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of or	ganization		Employer identification number
45COM	MITTEE, INC.		47-3803487
Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
1		\$500,0	000.       Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
2		\$75,0	000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
3		\$100,0	000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
4		\$50,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
5		\$150,0	000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
6		\$750,0	) 0 0 . Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

14 2015.05040 45COMMITTEE, INC.

523452 10-26-15

18320216 796448 06784

06784__1

Name of organi	zation		Employ	ver identification number
45COMMI	TTEE, INC.		47	7-3803487
Part I C	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	tions	(d) Type of contribution
7 _		\$100,	.000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	tions	(d) Type of contribution
<u> </u>		\$500,	000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for

noncash contributions.) Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

523452 10-26-15

15 2015.05040 45COMMITTEE, INC.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)
Name of organization

45COMMITTEE, INC.

Employer identification number

47-3803487

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ Schedule B (Form 990, 990-EZ, or 990-PF) (2015) 523453 10-26-15 16 2015.05040 45COMMITTEE, INC. 18320216 796448 06784 06784__1

5COMMIT	TEE, INC.	dribudione to excepted to a described	47-3803487
1	<b>the vear from any one contributor</b> . Complete	columns (a) through (e) and the follo	l in section 501(c)(7), (8), or (10) that total more than \$1,00 wing line entry. For organizations
	completing Part III, enter the total of exclusively religio Use duplicate copies of Part III if addition	us, charitable, etc., contributions of \$1,000 o nal space is needed	r less for the year. (Enter this info. once.)
a) No. from	· · · ·		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ť
	Transferee's name, address, a	and $7IP \pm 4$	Relationship of transferor to transferee
	Transferce 3 hame, address, e		
a) No. from	(h) Durness of sift		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	't
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
			÷
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(*) * * * * 5 * * 5 * *	(-)	(
		(e) Transfer of gif	*
			L .
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
		[	
a) No			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			[
		(e) Transfer of gif	t l
	<b>_</b>		
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
1			

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nan	ne of orgai	nization				Emplo	oyer identificatio	on number
		45COMMI	TTEE, INC.				47-38034	487
Pa	art I-A	Complete if the org	ganization is exempt unde	r section 501(c) o	or is a section {	527 or	ganization.	
2 3	Political e Voluntee	expenditures	zation's direct and indirect political				99	9,001. 0.
			ganization is exempt unde					
1	Enter the	amount of any excise tax	incurred by the organization under	section 4955		🏲 \$ .		
			incurred by organization managers					
3	If the org	anization incurred a section	n 4955 tax, did it file Form 4720 fo	r this year?			Yes	No No
							Yes	└── No
<u>k</u>	If "Yes,"	describe in Part IV.				=0.17		
Pa	art I-C	Complete if the org	panization is exempt unde	r section 501(c),	except section	-		
1	Enter the	amount directly expended	d by the filing organization for sect	on 527 exempt function	on activities	🏲 \$ .	99	9,001.
2	Enter the	amount of the filing organ	ization's funds contributed to othe	r organizations for sec	ction 527			
	exempt f	unction activities				▶\$.		
3			s. Add lines 1 and 2. Enter here and					
								9,001.
4	Did the fi	ling organization file <b>Form</b>	1120-POL for this year?				Yes	X No
5	Enter the	names, addresses and er	nployer identification number (EIN)	of all section 527 poli	tical organizations t	to which	h the filing organi	zation
			tion listed, enter the amount paid t					
			omptly and directly delivered to a s	· · · •		separat	e segregated fur	nd or a
	political a	action committee (PAC). If	additional space is needed, provid	e information in Part IV	V.			
		(a) Name	(b) Address	<b>(c)</b> EIN	(d) Amount paid filing organizatio funds. If none, ent	on's	(e) Amount of contributions re- promptly and delivered to a political organ	ceived and I directly separate

			,	delivered to a separate political organization. If none, enter -0
For Paperwork Reduction Act Notice	see the Instructions for Form 99	0 or 990-E7	Schedule C	(Form 990 or 990-EZ) 2015

E t Notice, see the Instructions for Form 990 or 990 LHA

orm 990 or 990-i

OMB No. 1545-0047

Open to Public

Inspection

5

⁵³²⁰⁴¹ 10-05-15

Schedule C (Form 990 or 990-EZ) 2015	anization is ex	empt under section	on 501(c)(3) and file	ed Form 5768 (	3803487 Page Page Page Page Page Page Page Page
section 501(h)).					
	-	* • •	in Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share 3 Check ► □ if the filing organizat	,	and "limited control" pr			
			ovisions apply.	(a) Filing	(b) Affiliated gro
	s on Lobbying Ex _l itures" means am	penditures ounts paid or incurred	.)	organization's totals	totals
1a Total lobbying expenditures to influ	ence public opinio	n (grass roots lobbying)			
<b>b</b> Total lobbying expenditures to influ	ence a legislative b	ody (direct lobbying)			
c Total lobbying expenditures (add lir	es 1a and 1b)				_
d Other exempt purpose expenditure					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter			11		
If the amount on line 1e, column (a) or		obbying nontaxable an			
Not over \$500,000		of the amount on line 16			
Over \$500,000 but not over \$1,000		000 plus 15% of the ex			
Over \$1,000,000 but not over \$1,50		000 plus 10% of the ex			
Over \$1,500,000 but not over \$17,0 Over \$17,000,000		000 plus 5% of the exc 0,000.	ess over \$1,500,000.		
Over \$17,000,000	51,00	0,000.			
g Grassroots nontaxable amount (ent	er 25% of line 1f)				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero			•		
j If there is an amount other than zer			-		•
reporting section 4911 tax for this y	ear?				Yes
	4-Year A	veraging Period Unde	r section 501(h)		
(Some organizations th		501(h) election do not arate instructions for I	•	of the five columns	below.
T	Lobbying Exp	enditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	(c) 2014	<b>(d)</b> 2015	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

532042 10-05-15

#### Schedule C (Form 990 or 990-EZ) 2015 45COMMITTEE, INC.

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Yes       No       Amount         1       During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:       Image: Comparison of the co
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?
d Mailings to members, legislators, or the public?
e Publications, or published or broadcast statements?
f Grants to other organizations for lobbying purposes?
g Direct contact with legislators, their staffs, government officials, or a legislative body?
i Other activities?
j Total. Add lines 1c through 1i
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?
b If "Yes," enter the amount of any tax incurred under section 4912
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section
501(c)(6).
Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?1
Did the organization make only in-house lobbying expenditures of \$2,000 or less?
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is
answered "Yes."
1 Dues, assessments and similar amounts from members
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
expenses for which the section 527(f) tax was paid).
a Current year 2a
b Carryover from last year 2b
c Total 2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political
expenditure next year? 4
5 Taxable amount of lobbying and political expenditures (see instructions) 5
Part IV Supplemental Information
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see
nstructions); and Part II-B, line 1. Also, complete this part for any additional information. PART I-A, LINE 1:

#### POLITICAL ADVERTISING PRODUCTION

Schedule C (Form 990 or 990-EZ) 2015

532043 10-05-15

				21				532101 10-28-15
Schedule I (Form 990) (2015)					ions for Form 990.	, see the Instruct	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	^
2.				:	ganizations listed in the first of the first	nd government or s listed in the line	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	<ol> <li>2 Enter total num</li> <li>3 Enter total num</li> </ol>
,								
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			0.	505,000.	501(C)(4)	27-3097431	EDOM EET 2314	ALLIANCE FOR FREEDOM 1020 BERNARD STREET ALEXANDRIA, VA 22314
TO FURTHER THE ORGANIZATION'S EXEMPT PURPOSE			o.	150,000.	501(C)(4)	46-3437207	TIATIVE AVENUE NW STE 610	THE JOHN HAY INITIATIVE 801 PENNSYLVANIA AVENUE WASHINGTON, DC 20004
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	<b>(d)</b> Amount of cash grant	<b>(c)</b> IRC section if applicable	(b) EIN	<b>1 (a)</b> Name and address of organization or government	<b>1 (a)</b> Name and <i>a</i> or go
IV, line 21, for any	res" on Form 990, Part	anization answered "\	complete if the organd	<b>c Governments.</b> C ional space is neec	izations and Domestin be duplicated if addit	<b>Domestic Organi</b> \$5,000. Part II can	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Part II Grants a
			d States.	funds in the Unite	s for monitoring the use of grant	ocedures for monit	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	2 Describe in Par
tion X Yes No	sistance, and the select	y for the grants or ass	grantees' eligibility	or assistance, the	e amount of the grants	:o substantiate the stance?	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the orants or assistance?	<ol> <li>Does the organ criteria used to</li> </ol>
						nd Assistance	General Information on Grants and Assistance	Part I General
Employer identification number $47 - 3803487$						EE, INC.	tion 45COMMITTEE	Name of the organization
Inspection	0.	t www.irs.gov/form990.	in serversions is at	Form 990) and its instru	Information about Schedule I (Form 990) and its instructions is at	Informati		Internal Revenue Service
2015		izations, ted States t IV, line 21 or 22.	ce to Organ s in the Unition Form 990, Par	ler Assistan Id Individual n answered "Yes"	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	Compl		SCHEDULE I (Form 990)
			)				-	

Schedule I (Form 990) (2015) 45COMMITTEE, INC.	•				47-3803487 Page 2
er Assistance to Domestic Individ	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Supplementa	uired in Part I, line	∋ 2, Part III, column	) (b), and any other a	dditional information.	
PART I, LINE 2: A GRANT REPORT IS REQUESTED FROM THE		RECIPIENT WITHIN	SIX MON	THS OF	
RECEIVING THE GRANT. THE RECIPIENT	MUST	ALSO ATTEST THAT	THAT THEY	HAVE USED	
A GRANT APPLICATION IS REVIEWED AND	D APPROVED	ID BY THE	BOARD OF D	DIRECTORS.	

Schedule I (Form 990) (2015)

SCHEDULE L (Form 990 or 990-EZ)					Interested			26, 27,	28a,	ON		1545-0	047
Department of the Treasury Internal Revenue Service	► Information a	► At	tach to	Form	-EZ, Part V, line 38a 990 or Form 990-Ea EZ) and its instructior	Z.		orm99	0.		<b>LU</b> pen T spect		olic
Name of the organization	AECOMMI	TTEE, INC							-	identi 034		on ni	umber
				3), sect	ion 501(c)(4), and 50	01(c	)(29) organizatior			034	07		
					art IV, line 25a or 25	b, oı	r Form 990-EZ, P	art V,	line 40	)b.			
1 (a) Name of disqualified	person	(b) Relationship b person and			lified (	<b>c)</b> D	escription of trar	sactic	n			es	No
											_		
											_		
2 Enter the amount of tax	•	-	-			-	•		•				
section 4958 3 Enter the amount of tax,	, if any, on line	e 2, above, reimbu	irsed by	the or	ganization				► \$ ► \$				
		Interested Pe											
					, Part V, line 38a or	Forr	n 990, Part IV, lir	ne 26;	or if th	ne orga	anizati	on	
		990, Part X, line 5	14.00								orovod		
(a) Name of interested person	(b) Relations with organiza		fror	oan to or m the ization?	(e) Original principal amount	(1	i) Balance due	(g) defa	) In ault?	( <b>h)</b> App by boa comm	ard or	יייין	Vritten ement?
			То	From		-		Yes	No	Yes	No	Yes	No
			_			$\vdash$							
						$\vdash$							
			_			$\vdash$							
Total					►\$	1							
Part III Grants or As		Benefiting Int			rsons.								
Complete if the (a) Name of interested	-	answered "Yes" o (b) Relationsh			art IV, line 27. (c) Amount of		(d) Type	of		(e)	) Purp	Inse r	of
	person	interested pe the organ	erson ar		assistance		assistan				assist		, i
									$\rightarrow$				
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2015

532131 10-02-15

### Schedule L (Form 990 or 990-EZ) 2015 45COMMITTEE, INC.

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 2	8D, OF 28C.			
(a) Name of interested person	(b) Relationship between interested person and the organization	<b>(c)</b> Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
REDPRINT STRATEGY	SEE PART V	44,121.	MANAGEMENT		X

#### Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

#### SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

#### (A) NAME OF PERSON: REDPRINT STRATEGY

(D) DESCRIPTION OF TRANSACTION: MANAGEMENT CONSULTING

#### PART IV, COLUMN B

BRIAN WALSH, CHAIRMAN AND PRESIDENT OF THE ORGANIZATION, IS A PARTNER

#### IN REDPRINT STRATEGY.

Schedule L (Form 990 or 990-EZ) 2015

	MUR748600104					
SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/h		OMB No. 1545-0047 <b>2015</b> Open to Public Inspection			
Name of the organizatio		Employer i	dentification number			
FORM 990, PA	RT VI, SECTION B, LINE 11:					
A COPY OF TH	E 990 WILL BE REVIEWED BY THE BOARD BEFORE FI	LING.				
FORM 990, PA	RT VI, SECTION B, LINE 12C:					
OFFICERS AND	DIRECTORS ARE REQUIRED TO SIGN AN ANNUAL STA	TEMENT	THAT THEY			
HAD REVIEWED	THE CONFLICT OF INTEREST POLICY AND DISCLOSI	NG ANY	CONFLICTS			
OF INTEREST.	TRANSACTIONS WITH INTERESTED PARTIES ARE EV	ALUATEI	) BY			
INDEPENDENT	DIRECTORS USING INFORMATION REGARDING WHAT SI	MILAR				
ORGANIZATION	S PAY FOR SIMILAR SERVICES.					
FORM 990, PART VI, SECTION C, LINE 19:						
DOCUMENTS RE	QUIRED BY LAW TO BE DISCLOSED ARE MADE AVAILA	BLE UPC	ON REQUEST.			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sch

Schedule O (Form 990 or 990-EZ) (2015)

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²⁵ 2015.05040 45COMMITTEE, INC.

					26			532161 09-08-15 LHA
orm 990) 2015	Schedule R (Form 990) 2015					is for Form 990.	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	For Paperwork Reduc
×		N/A		NIA 527	I VIRGINIA	POLITICAL ORGANIZATION	79543 71	FUTURE45 - 47-3479543 P.O. BOX 710993 HERNDON, VA 20171
Yes No		501(c)(3))						
(g) Section 512(b)(13) controlled entity?	(f) Direct controlling entity	(e) Public charity status (if section	(d) Exempt Code Pu section statu	(c) Legal domicile (state or foreign country)	Legal	<b>(b)</b> Primary activity	(a) Name, address, and ElN of related organization	Nam of re
	ore related tax-exemp	se it had one or mo	t IV, line 34 becaus	d "Yes" on Form 990, Par	ation answerec	itions Complete if the organiz	Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	Part II Identificatio
						•		
						•		
y	erts Direct controlling entity	End-or-year assets	I Otal Income	foreign country)	Le	Primary activity	Name, address, and EIN (II applicable) of disregarded entity	Name, addr of (
		(e)	(d)	(c)	-	(d)		
				۱ 990, Part IV, line 33.	"Yes" on Form	if the organization answered	Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.	Part I Identification
tion number 7 	Employer identification number $47 - 3803487$					INC.	45 COMMITTEE,	Name of the organization
spection			w.irs.gov/form990.	its instructions is at ww	orm 990) and	Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.	► Infor	Internal Revenue Service
Open to Public	Ope			orm 990.	<ul> <li>Attach to Form 990.</li> </ul>			Department of the Treasury
2015	N	37.	3, 34, 35b, 36, or	Form 990, Part IV, line S	ered "Yes" on	Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.	Compl	(Form 990)
OMB No. 1545-0047	OMB		rtnerships	Inrelated Partn	ions and	Related Organizations and Unrelated Pa		SCHEDULE R

990) 2015	Schedule R (Form 990) 2015	Sched					27				532162 09-08-15	532162
(i) Section 512(b)(13) controlled entity? Yes No	(h) Percentage ownership	(g) Share of P end-of-year of assets		(f) Share of total income	(e) Type of entity (C corp, S corp, or trust)	(d) Direct controlling entity	(c) Legal domicile Di (state or foreign country)	(b) Primary activity	Prim	³ Ž	(a) Name, address, and EIN of related organization	
e related	l one or more	ed "Yes" on Form 990, Part IV, line 34 because it had one or more related	art IV, line 34	orm 990, Pa	ered "Yes" on F	Trust Complete if the organization answer	mplete if the or	oration or Trust Co /ear.	as a Corpo ing the tax y	ganizations Taxable	t IV Identification of Related Organizations Taxable as a Corporation or organizations treated as a corporation or trust during the tax year.	Part IV
(J) (K) General or Percentage managing partner? Yes No	(J) General or P managing be partner? (S) Yes No	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(n) Disproportionate allocations? Yes No	(g) Share of end-of-year assets	(t) Share of total S income en		(e) Predominant income (related, unrelated, excluded from tax under sections 5 12-514)	(a) Direct controlling entity	(C) Legal domicile (state or foreign country)	<b>(b)</b> Primary activity	(a) Name, address, and EIN of related organization	
Page 2	47-3803487 one or more related	47 - 3803487 on Form 990, Part IV, line 34 because it had one or more related	34 because	Part IV, line	s" on Form 990,	n answered "Yes	the organizatio	ership Complete if	INC • ble as a Partn he tax year.	45COMMITTEE, I) ated Organizations Taxable las a partnership during the	<ul> <li>R (Form 990) 2015</li> <li>Identification of Rel organizations treated</li> </ul>	Schedule Part III

U

10) 2015	{ (Form 99)	Schedule R (Form 990) 2015		28	532163 09-08-15
					(6)
					(5)
					(4)
					(3)
					(2)
			38,000.	G	(1) FUTURE 4 5
	olved	(d) Method of determining amount involved	(c) Amount involved	<b>(b)</b> Transaction type (a-s)	(a) Name of related organization
		elationships and transaction thresholds.	his line, including covered r	vho must complete t	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.
×	1s =				Curier transfer of cash or property to related organization(s)     S Other transfer of cash or property from related organization(s)
×	÷				
×	1q				
Х	1p			· · · · · · · · · · · · · · · · · · ·	p Reimbursement paid to related organization(s) for expenses
>	10				o Sharing of paid employees with related organization(s)
-	1n X			on(s)	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
×	1m				m Performance of services or membership or fundraising solicitations by related organization(s)
	=			tion(s)	I Performance of services or membership or fundraising solicitations for related organization(s)
×	1k				k Lease of facilities, equipment, or other assets from related organization(s)
:					
×	= =				<ul> <li>Excitative of activities equipment or other assets to related organization(s)</li> </ul>
	* =				
×	1h				<ul> <li>b Durchase of assets from related organization(s)</li> </ul>
+	12 X				
×	#				f Dividends from related organization(s)
×	1e				e Loans or loan guarantees by related organization(s)
×	1d				d Loans or loan guarantees to or for related organization(s)
	10				c Gift, grant, or capital contribution from related organization(s)
×	1b				<b>b</b> Gift, grant, or capital contribution to related organization(s)
×	<b>1</b> a			′	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
		n Parts II-IV?	elated organizations listed i	s with one or more r	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
s No	Yes				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.
		or 36.	1 990, Part IV, line 34, 35b, or 36	vered "Yes" on Form	Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV,

Schedule R	
Schedule R (Form 990) 2015	
45 COMMITTEE,	
INC.	

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Schedule R (Form 990) 2015	R (Form	Schedule								
									·	
( <b>k)</b> ⁵ ercentage ownership	(j) General or managing partner? Yes NO	(h)(i)(j)(k)Dispopor- tionate allocations?Code V-UBI of Schedule K-1General or percentage managing partner?General or percentage ownershipYes No(Form 1065)Yes No	(h) Dispropor- tionate allocations? Yes No	(g) Share of end-of-year assets	(f) Share of total income	e partners sec. 501 (c)(3) der orgs.? Yes No	(c) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(c) Legal domicile (state or foreign country)	<b>(b)</b> Primary activity	(a) Name, address, and EIN of entity
							estment partnerships	usion for certain inv	structions regarding exclu	that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

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Schedule R (Form 990) 2015

Schedule R (Form 990) 2015 45C Part VII Supplemental Information	OMMITTEE, INC.	47-3803487 Page
	responses to questions on Schedule R (see ins	tructions)
2165 09-08-15		Schedule R (Form 990) 20
	30	
20216 796448 06784	2015.05040 45COMMIT	TEE, INC. 06784

# **Exhibit** C

#### **BEFORE THE FEDERAL ELECTION COMMISSION**

))

# MUR 7486

#### **DECLARATION OF MARIA WOJCIECHOWSKI**

I, Maria Wojciechowski, declare as follows:

1. My name is Maria Wojciechowski. I am the Treasurer of 45Committee, Inc., a social welfare organization tax exempt under § 501(c)(4) of the Internal Revenue Code. I have personal knowledge of the facts described in this Declaration.

45Committee, Inc. annually files an IRS Form 990 for its fiscal year, covering activity from April 1 through March 31 of the following calendar year. To date, it has filed Form 990s for fiscal years 2016 (covering April 2015 through March 2016) and 2017 (covering April 2016 through March 2017).

3. Since its inception in April 2015, 45Committee, Inc.'s spending has been primarily related to issue advocacy and policy debates consistent with its tax-exempt status.

4. In the aggregate, from April 2015 through September 2018, 45Committee, Inc. has spent \$42,702,265.30 (over 63.1% of total spending) on issue advocacy campaigns and \$24,089,356.53 (under 35.6%) on political advocacy. If 45Committee's electioneering communications are treated as political speech, then the relative aggregate spending breakdown is \$41,863,275.42 (61.8%) on issue and \$24,928,346.41 million (36.8%) on political.

5. In each of 45Committee, Inc.'s 2016, 2017, and 2018 fiscal years, and so far in the 2019 fiscal year, less than half of the organization's total fiscal year spending was on political activity, including electioneering communications. In fiscal year 2016, the percentage breakdown was 65.0% issue, 9.8% political. In fiscal year 2018, it was 85.8% issue, 13.2%

political. Through September 2018, over 90% of 45Committee's fiscal year spending has been on issue advocacy.

In fiscal year 2017, 45Committee, Inc. spent \$23,457,137.73 (51.5% of total 6. spending) on issue advocacy campaigns and \$21,650,515.32 (47.5%) on political advocacy. If 45Committee's electioneering communications during that period, totaling \$671,320.00, are treated as political speech, then the breakdown of total spending was \$22,785,817.73 (over 50.0%) issue and \$22,321,835.32 (49.0%) political.

7. 45Committee, Inc.'s total operating costs in fiscal year 2017 were \$447,430.53. For sake of analysis, if all operating costs are allocated as political expenses, 45Committee's political spending remained under 50% of total expenditures in fiscal year 2017.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on October 10, 2018.

Taria Wozrechinishi

Maria Wojciechowski

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