Tennessee Registry of Election Finance WRS Tennessee Tower, 26th Floor 312 Rosa L. Parks Avenue Nashville, TN 37243-1360 (615) 741-7959



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT INSTRUCTIONS

FOR CERTAIN TAX-EXEMPT ORGANIZATIONS

#### **GENERAL INSTRUCTIONS**

This booklet contains campaign financial disclosure reporting forms to be used in the filing of campaign disclosure statements by certain tax-exempt organizations, including any organization that is tax exempt under United States Internal Revenue Service Code § 501(c)(4), (5), and/or (6) (26 USC §501(c)(4), (5), (6)), pursuant to Tenn. Code Ann. § 2-10-132(b). These organizations are required to file campaign financial disclosure reports with the Registry of Election Finance to report expenditures in accordance with Tenn. Code Ann. § 2-10-105(c)(1) and (h) during the remainder of the election year if the organization 1) expends and aggregate total of at least five thousand dollars (\$5,000) in organizational funds, moneys, or credits for communications that expressly contain the name or visually depict the likeness of a state candidate in a primary or general election and 2) such expenditures or communications occur within sixty (60) days immediately preceding a primary or general election in which the named or visually depicted candidate appears on the ballot.

These organizations are **NOT** required to report any form of contributions.

These organizations are not deemed to be or defined as PACs, unless the organization's activities otherwise meet the definition of a "political campaign committee" as defined by Tenn. Code Ann. § 2-10-102. All filers should review the applicable campaign finance laws, rules, and regulations.

Also contained in this booklet are separate instructions for completing each form and sample completed forms. The following three (3) types of forms are included in this booklet:

- Campaign Financial Disclosure Statement for Certain Tax-Exempt Organizations
- Itemized Statement of Expenditures
- Itemized Statement of Obligations

#### I. How To Complete And File Campaign Financial Disclosure Statements

- Read the instructions in this booklet carefully.
- If using a paper form, type or print clearly in black ink.
- Reports to be filed with the Registry can also be filed by fax machine, by electronic mail message, by hand delivery, or by overnight delivery to the Registry of Election Finance, WRS Tennessee Tower, 312 Rosa L. Parks Avenue, Nashville, TN 37243. To submit via fax to the Registry of Election Finance, use the following fax number: (615) 532-8905. To submit via electronic mail to the Registry of Election Finance, use the following email address: Registry.Info@tn.gov.
- Reports can also be filed online using the Registry's online form at the following link: https://stateoftennessee.formstack.com/forms/ss\_1126.
- Campaign financial disclosure statements must be received by the Registry by the close of business on the report's due date to be considered timely filed. A postmark date has no effect

on a report's timeliness except when the report is mailed by registered or certified mail. Statements mailed in this matter are considered filed on the date of the postmark.

# Reports will be returned if they are not complete, do not contain the required signatures, are mathematically inaccurate, or if the appropriate form was not filed.

#### **II.** When To File Campaign Financial Disclosure Statements

Any organization required to file campaign financial disclosure reports under Tenn. Code Ann. § 2-10-132(b) should file a Certification of Responsible Individuals for Certain Tax-Exempt Organizations form with the Registry of Election Finance before any expenditure or communication triggering such registration is made or immediately after the organization becomes aware that registration and filing is required. Thereafter, any organization required to file under this section should file the appropriate Campaign Financial Disclosure Statement For Certain Tax-Exempt Organizations in accordance with the quarterly and pre-election schedule for the remainder of the election year in which filing is required. Any organization required to file under this section should also file Interim Reports as required by Tenn. Code Ann. § 2-10-105(h). For more information regarding Interim Reports, see the information booklet for that form.

Quarterly campaign financial disclosure statements are due on the 11<sup>th</sup> day of the month following end of each quarter. Pre-primary and Pre-General campaign financial disclosure statements are due on the 7<sup>th</sup> day prior to the applicable election date. If the due date falls on a weekend or holiday, the report will be due on the next normal business day.

Any organization required to file under this section will receive a filing notice and campaign financial disclosure forms and instructions from the Registry before any disclosure report is required to be filed by the organization, provided that the organization has previously registered with the Registry by filing the Certification of Responsible Individuals For Certain Tax-Exempt Organizations form. Filing notices will also be sent via email before any disclosure report is required to be filed, provided that the organization has provided a valid email address for this purpose. It is important that registering organizations ensure that their contact information is kept up to date and that all mailboxes are regularly maintained.

#### **III. Failure To File Timely Reports**

Failure to file reports timely or to file accurate reports may result in the assessment of civil penalties against the organization.

#### CAMPAIGN FINANCIAL DISCLOSURE STATEMENT For Certain Tax-Exempt Organizations

ITEM 1.	Enter the date the report was completed.				
		ITEM 8.	The organization must certify that it is		
ITEM 2.	Enter the name of the organization.		required to report expenditures as		
			required by Tenn. Code Ann. § 2-10-		
ITEM 2A.	If the organization has a short name, enter		132(b).		
	it here.				
			The organization's responsible		
ITEM 3.	Enter the organization's mailing address		individual, or any individual who		
	and phone number.		directly controls expenditures, should		
			then sign on the signature line and enter		
ITEM 4.	Enter the name of the individual filing		the date of signature.		

**ITEM 5.** Enter the title or position name of the individual filing the report.

the report.

ITEM 6. Check the box for the period that the report being filed covers. If the report is an amended report, check the box for the period that the original report filed covered.

**ITEM 7.** Enter the beginning date of the reporting period covered by the report. Enter the ending date of the reporting period covered by the report.

The filer's signature should be witnessed, and the date entered.

ITEM 9A. Enter the total expenditures made for the purpose of producing and distributing communications made during this period in the State of Tennessee relating to a candidate for state public office in this state.

**ITEM 9B.** Enter the total amount of obligations for goods and service received on credit outstanding during this period.



# **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT For Certain Tax Exempt Organizations**

Tennessee Bureau of Ethics and Campaign Finance

**INSTRUCTIONS:** This form must be used to report expenditures as required by the Campaign Financial Disclosure Act (T.C.A. § 2-10-132(b)), by any organization that is tax exempt under United States Internal Revenue Service Code §§ 501(c)(4), 501(c)(5), or 501(c)(6) (26 U.S.C. §§ 501(c)(4)-(6)) which expends an aggregate total of at least five thousand dollars (\$5,000) in organizational funds, moneys, or credits for communications that expressly contain the name or visually depict the likeness of a state or local candidate in a primary or general election within sixty (60) calendar days immediately preceding a primary or general election in which the named or visually depicted candidate appears on the ballot.

This form should be used for each reporting period of the election year in which the organization/committee is required to file.

		3				
1. Date: _July 28, 2022_						
2. Organization Name: <u>ABC 501(c)(4) Organi</u>	2a. Short Na	2a. Short Name (If Applicable): ABC				
3. Address: 123 ABC Street						
City: Washington	State: DC	_ Zip Code:	Phone: _202-123	-4567		
4. Name of Filer: <u>John A. Doe</u>		5. Title of Filer: Dire	of Filer: Director of Legislative Affairs			
б. Category or Report:						
☐ First Quarter ☐ Second Quarter	☐ Third Quarter	☐ Fourth Quarter	☑ Pre-Primary	☐ Pre-General		
7. Reporting Period: Start Date: <u>July 1</u>	, 2022	End Date: <u>July 25, 2022</u>				
8. Certification:						
This organization is required to report its ex organization under United States Internal which has expended an aggregate total of for communications that expressly contain general election within sixty (60) calenda visually depicted candidate appears on the	Revenue Service Cod of at least five thousa of the name or visually or days immediately po e ballot.	le §§ 501(c)(4), 501(c)(5), ond dollars (\$5,000) in orgoidepict the likeness of a streeding a primary or gen	or 501(c)(6) (26 U.S.G ganizational funds, r tate or local candida neral election in wh	C. §§ 501(c)(4)-(6)) moneys, or credits ate in a primary or ich the named or		
I do solemnly swear or affirm that the infor all applicable provisions of the Campaign F			nat the committee i	ias complied with		
John A. Doe Signature of Filer			July 28, 2022			
Signature of Filer			Date			
Mary Lamb Signature of Witness			July 28, 2022 Date			
9. Summary:		. 11 00	00.00			
a. Total Expenditures This Period						
b. Total Obligations Outstanding This Period		\$ <u>3,50</u>	\$_3,500.00			

#### ITEMIZED STATEMENT OF EXPENDITURES – TAX EXEMPT

All expenditures to any payee during the reporting period must be itemized on the "Itemized Statement of Expenditures" For purposes of this report, any organization required to file campaign financial disclosure reports pursuant to Tenn. Code Ann. § 2-10-132(b) must disclose all expenditures occurring during the reporting period for all activity engaged in by the organization relating to an election for state public office in the State of Tennessee during the applicable reporting period.

- **ITEM 1.** Enter the name of the committee. Must be the same as item 2 on page one.
- **ITEM 2.** Enter the beginning and ending dates for the reporting period. Must be the same as item 7 on page one.
- Statement of Expenditures" page completed for this reporting period. If this is an additional page, bring forward the total from the previous "Itemized Statement of Expenditures" page (Item 5).

ITEM 4. Enter the complete name and address of each payee, as well as the purpose, amount and date of each expenditure. The purpose of an expenditure must be a specific description (e.g., graphic design, mailing, distribution, etc.). General phrases such as "expenses" or "miscellaneous" shall not be sufficient

for providing a purpose.

For each expenditure's purpose, include the name of the candidate referenced or pictured in the communication to which the expenditure relates and the office sought by the candidate.

**ITEM 5.** Enter the total of Item 3 and all amounts listed in Item 4 on this page.

If more than one page of this form is needed to disclose all expenditures, the total amount shown in Item 5 of the previous statement must be carried forward to Item 3 of the next page and be included in that page's total. The amount shown in Item 5 on the last page of the "Itemized Statement of Expenditures" must also be shown in item 9A on Page 1 of the disclosure report.

### STATEMENT OF EXPENDITURES

1. Organization Name: ABC 501(c)(4) Organi	zation					
2. Reporting Period: Start Date: 7/1/2022	End Date	e: 7/25/2022				
3. TOTAL EXPENDITURES FROM PRECEDING	G PAGE (enter \$0 if first	st page): <u>0</u>				
		For each expenditure's purpose, include the name of the candidated inditure relates and the office sought by such candidate.	ate			
First Name:	Middle Name:	Last Name:	_			
Business Name: DEF Consulting Services			_			
Address: 456 DEF Street, Suite 5000	City: Na	lashville State: TN Zip Code: 37243	_			
Purpose of Expenditure: <u>Graphic Design r</u>	e: election related com	nmunication, in opposition to "Brutus for Governor"	_			
Date of Expenditure: 7/15/2022	2022 Amount of Expenditure: \$ _5000.00					
First Name: Mark	Middle Name:	Last Name: Anthoney	_			
Business Name:			_			
Address: 200 Roman Way	City: Su	umner State: TN Zip Code: 37075	_			
Purpose of Expenditure: <u>Printing and mail</u>	ng services re: election	n related communication, in support of "Ceasar for State House"	_			
Date of Expenditure: 7/24/2022	/2022 Amount of Expenditure: \$ _6000.00					
First Name:	Middle Name:	Last Name:	_			
Business Name:			_			
Address:	City:	State: Zip Code:	_			
Purpose of Expenditure:			_			
Date of Expenditure:	Amount of Expenditure: \$					
First Name:	Middle Name:	Last Name:				
Business Name:			_			
Address:	City:	State: Zip Code:	_			
Purpose of Expenditure:			_			
Date of Expenditure:	Amount of Expenditure: \$					
First Name:	Middle Name:	Last Name:				
Business Name:			_			
Address:	City:	State: Zip Code:	_			
Purpose of Expenditure:			_			
Date of Expenditure:	Amount of Expenditure: \$					
Total Expenditures: \$ 11.000.00						

(Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of campaign expenditures, this amount must be shown in item 9.a. of summary on first page.)

#### ITEMIZED STATEMENT OF OBLIGATIONS – TAX EXEMPT

All obligations received for goods and services on credit during the reporting period for which payment is owed to any person/vendor must be itemized on the Itemized Statement of Obligations."

- **ITEM 1.** Enter the name of the committee. Must be the same as item 2 on page one.
- **ITEM 2.** Enter the beginning and ending dates for the reporting period. Must be the same as item 7 on page one.
- **ITEM 3.** Enter the following for each obligation:
  - The complete name and address of the vendor and/or person to which payment is owed.
  - A description of the obligation. For each obligation's purpose, include the name of the candidate referenced or pictured in the communication to which the expenditure (obligation) relates and the office sought by such candidate.
  - c. The outstanding obligation balance at the beginning of the reporting period. This must equal the

outstanding obligation.

- d. The amount of any additional purchases made from this vendor on credit this period.
- e. The amount of any expenditures made to reduce the outstanding obligations.
- f. The "Outstanding Balance (Period End)". This must equal the "Outstanding Balance (Period Beginning)" plus any "Debt Incurred", minus any "Payments This Period".
- ITEM 4. On the last page of itemized obligations, totals must be shown for the "Outstanding Balance (Period Beginning)", "Debt Incurred", "Payments This Period", and "Outstanding Balance (Period End)" for all obligations.

The total shown for "Outstanding Balance (Period End)" must also be shown in item 9B of page 1 of the disclosure report.

## STATEMENT OF OBLIGATIONS

1. Organization Name: ABC 501(c)(4) Organization				
2. Reporting Period: Start Date: 7/1/2022 End Date:	7/25/2022			
COMPLETE THE APPROPRIATE ITEMS FOR EACH OBLIGATION: (Ob period. For each obligation's purpose, include the name of the cathe expenditure relates and the office sought by such candidate.)	andidate referenced			
First Name: Middle Name:	Description of Obligation:	Outstanding invoice for graphic design services, re: "Brutus for Goveror"		
Last Name:				
Business Name: Nero's Graphic Design		D.1.	T <sub>2</sub> .	To !!
Address: 123 Italy Street	Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
City: Rome	\$0	\$3000.00	\$500.00	\$2500.00
State: TN Zip Code: 37002				•
First Name: John Middle Name: P	Description of Obligation:	Outstanding invoice for provision of social media communications to be released on election day, re: "Ceasar for State House"		
Business Name:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City: Vatican City	Beginning)			(Period End)
•	\$6000.00	\$0	\$5000.00	\$1000.00
State: TN Zip Code: 37002				
First Name: Middle Name:	Description of Obligation:			
Business Name:	Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
City:	\$	\$	\$	\$
State: Zip Code:				
First Name: Middle Name:	Description of Obligation:			
Business Name:	Outstanding Balance (Period	Debt Incurred	Payments This Period	Outstanding Balance
City:	Beginning)			(Period End)
State: Zip Code:	\$	\$	\$	\$
21p Code	- Compression	Luis	I I I I I I I I I I I I I I I I I I I	- Contraction
TOTALS	Balance (Period Beginning)	Incurred	Payments This Period	Outstanding Balance (Period End)
(Total from "Outstanding Balance - (Period End)" column must				. '