## Who Files

Recipient Committees: Persons (including an officeholder or candidate), organizations, groups, or other entities that raise contributions from others totaling \$2,000 or more in a calendar year to spend on California elections. They must register with the Secretary of State and report all receipts and expenditures. "Contributions" include monetary payments, loans and non-monetary goods and services received or made for a political purpose.

**Candidates:** The personal funds of a candidate or officeholder used to seek or hold elective office are contributions and count toward qualifying as a recipient committee. However, personal funds used to pay a candidate filing fee or a fee for the statement of qualifications to appear in the ballot pamphlet do not count toward the \$2,000 threshold.

Multipurpose Organizations: A nonprofit organization, federal or out-of-state PAC, or other multipurpose organization that makes contributions or expenditures in California elections may also be required to register as a recipient committee with the Secretary of State. See the Fact Sheet on Multipurpose Organizations Reporting Political Spending and the Supplemental Form 410 Instructions.

## When to File

File this form within 10 days of receiving \$2,000 in contributions. Include a \$50 payment made payable to the Secretary of State. Thereafter, the \$50 fee is due annually no later than January 15. In addition to the \$50 fee, a penalty of \$150 may be assessed if payment is late.

For early submissions, mark the "not yet qualified" box. The \$50 fee is requested at this time but is not legally required until the committee qualification threshold has been met.

Where to File

**All Committees:** Form 410 with original ink

signature(s)
Secretary of State
Political Reform Division
1500 11th Street, Rm 495
Sacramento, CA 95814

**County & City** 

**Committees:** Also file a copy with the

local filing officer who will receive the original campaign statements.

Read instructions carefully as a Form 410 will be rejected if all applicable sections are not completed.

## **Committee ID Number**

The committee's FPPC ID number will be posted at cal-access.sos.ca.gov. To receive an official, stamped copy of your approved Form 410, send a request, the original form, two copies of the form, and a self-addressed, stamped envelope, to the Secretary of State.

#### **Amendments**

When information contained in the committee's Statement of Organization changes, file an amendment within 10 days of the change with the Secretary of State and local filing officer (if applicable). During the period 16 days before an election, file an amendment within 24 hours as described below.

# **24-Hour Reporting**

In addition to the 10-day rule to file an original Form 410:

- A recipient committee that qualifies during the 16 days prior to an election in which it must file preelection statements must file a Form 410 within 24 hours of qualification with the filing officer who will receive the committee's original disclosure statements.
- A recipient committee that qualifies during the 90 days prior to an election or on the date of the election in which the committee makes independent expenditures of \$1,000 or more to support or oppose a candidate in that election must file the Form 410 within 24 hours of qualification with the filing officer who will receive the committee's original disclosure statements and with the filing officer(s) for the candidate(s) supported or opposed by the independent expenditure.
- If, during the 16 days prior to an election when a committee is required to file pre-election statements, a change occurs in the name of the committee, the treasurer or other principal officers, or the controlling candidate, an amendment must be filed with the filing officer receiving the committee's original campaign statements within 24 hours of the change.

These filings must be made by fax, guaranteed overnight delivery, personal delivery or online (if online filing is available).

This form was prepared by the Fair Political Practices Commission (FPPC). For detailed information on campaign reporting requirements and the Information Practices Act of 1977, see the FPPC Campaign Disclosure Manual for your type of committee.

FPPC Form 410 (October/2017)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

| Statement of (<br>Recipient Con |                        |  |  | Date Stamp                     |                       | CALIFORNIA 410    |  |
|---------------------------------|------------------------|--|--|--------------------------------|-----------------------|-------------------|--|
| Statement Type                  | ☐ Initial              | ☐ Amendment  | ☐ Termination – See Part 5   |                                | For Official Use Only |                   |  |
|                                 | O Not yet qualified    | t  |  |                                |                       |                   |  |
|                                 | or  O Date qualified a | s committee ——/——/——   | //   |                                |                       |                   |  |
|                                 | O Date quamieu a       | Date qualified as commit   | ttee Date of termination   |                                |                       |                   |  |
|                                 | //                     | <u>'</u>   |  |                                |                       |                   |  |
| 1. Committee II                 | nformation             | I.D. Number<br>(if applicable)   |  | d Other Principal Office       | rs                    |                   |  |
| NAME OF COMMITTEE               |                        |  | NAME OF TREASURER  |                                |                       |                   |  |
|                                 |                        |  | STREET ADDRESS (NO P.O. BOX  | )                              |                       |                   |  |
| STREET ADDRESS (NO P.C          | O. BOX)                |  | CITY   | STATE                          | ZIP CODE              | AREA CODE/PHONE   |  |
|                                 |                        |  |  |                                |                       |                   |  |
| CITY                            |                        | STATE ZIP CODE AREA COI  | DE/PHONE NAME OF ASSISTANT TREASUR                                     | ER, IF ANY                     |                       |                   |  |
| MAILING ADDRESS (IF D           | IFFERENT)              |  | STREET ADDRESS (NO P.O. BOX  | )                              |                       |                   |  |
| E-MAIL ADDRESS (REQUI           | IRED) / FAX (OPTIONAL) |  | СІТҮ   | STATE                          | ZIP CODE              | AREA CODE/PHONE   |  |
| COUNTY OF DOMICILE              | JURI                   | ISDICTION WHERE COMMITTEE IS ACTIVE  | NAME OF PRINCIPAL OFFICER(   | S)                             |                       |                   |  |
|                                 |                        |  |  |                                |                       |                   |  |
|                                 | •                      |  | STREET ADDRESS (NO P.O. BOX  | )                              |                       |                   |  |
| Attach additional               | information on an      | propriately labeled continuation sho   | CITY   | STATE                          | ZIP CODE              | AREA CODE/PHONE   |  |
|                                 | myormation on ap       | propriately labeled continuation six   |  |                                |                       |                   |  |
| 3. Verification                 | 1.1. 1:1:              |  |  |                                |                       | 1 1.6             |  |
|                                 |                        | e in preparing this statement and to<br>of the State of California that the fo | o the best of my knowledge the inform<br>pregoing is true and correct. | lation contained herein is tru | le and complet        | e. Teertify under |  |
| Executed on                     | DATE                   | By   | SIGNATURE OF TREASURER OR ASSISTANT TREAS                              | NIDED                          |                       |                   |  |
| Executed on                     | 32                     | Ву   |  |                                |                       |                   |  |
|                                 | DATE                   | SIGNAT   | URE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STAT                    | E MEASURE PROPONENT            |                       |                   |  |
| Executed on                     | DATE                   | BySIGNATI  | URE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STAT                    | E MEASURE PROPONENT            |                       |                   |  |
| Executed on                     | DATE                   | Ву   |  |                                |                       |                   |  |
|                                 | DATE                   | SIGNAT   | URE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STAT                    | TE MEASURE PROPONENT           |                       |                   |  |

FPPC Form 410 (October/2017)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

# **Statement Type:**

#### Initial

Mark the "Initial" box and enter the date qualified as a committee. The "date qualified as a committee" is the date the committee received contributions totaling \$2,000 or more during a calendar year.

If the committee has not received contributions totaling \$2,000 or more, mark the "Initial" and "Not Yet Qualified" boxes.

#### **Amendment**

If any of the information reported on an initial statement of organization changes:

- Mark the amendment box:
- Include the committee's ID number and name;
- Provide the changed information; and
- Complete the verification.

**Candidates:** Under certain circumstances, a candidate for local office may amend the Form 410 to indicate that he or she is seeking re-election to the same office. A candidate for state office must open a separate committee for each term of office and may not amend the Form 410 to redesignate an election committee.

#### Termination

List the committee's name, identification number and indicate the date of termination, including completing the verification.

#### 1. Committee Information:

Provide the full name of the committee. A committee may use only one name.

The committee's street address, e-mail address, and telephone number must be reported. A post office box is not acceptable. The committee's mailing address must also be reported if it is different from the street address. A post office box is acceptable for the mailing address. A committee's "domicile" is its address as listed on the Form 410. Los Angeles is the county of domicile for committees located outside California.

Identify the jurisdiction where the committee is active. For example a city committee lists the name of the city.

# **Committee Name Requirements**

The following committee name rules apply to the Form 410, the committee's campaign statements and to any other references to the committee required by law. See the instructions for Part 4 for committee definitions.

**Candidate Controlled Committees:** Any committee that is controlled by a state or local candidate or officeholder must include the last name of the candidate in the name of the committee. In addition, the following rules apply:

- An election committee controlled by one or more state or local candidates must also include the office the candidate(s) is seeking and the year of the election (e.g., Friends of Smith for Assembly 20XX, Jones for Council 20XX).
- An officeholder committee set up by a state
  officeholder must also include the office held, the
  year the officeholder was elected to the current term
  of office, and the words "Officeholder Account,"
  as part of the committee name (e.g., Anderson
  Assembly 20XX Officeholder Account).
- A legal defense fund set up by a state or local candidate or officeholder must also include the words "Legal Defense Fund" as part of the committee name (e.g., Senator Smith Legal Defense Fund).
- A ballot measure committee controlled by one or more state candidates must also state that it is a ballot measure committee (e.g., Senator Lee's Ballot Measure Committee) prior to the designation of the ballot measure number. See additional requirements for primarily formed committees.

**Sponsored Committees:** A sponsored committee (including most political action committees) must include the full name of its sponsor in the name of the committee. If the committee has more than one sponsor and the sponsors are members of an industry or other identifiable group, include a term identifying that industry or group.

## **Primarily Formed Committees**

**Ballot Measures:** The name of each committee primarily formed to support or oppose a ballot measure must include:

- A statement identifying the ballot measure(s)
   number or letter and whether it supports or opposes
   the measure(s) (e.g., Committee For Proposition/
   Measure \_\_ or Committee Against Proposition/
   Measure \_\_).
- The economic or other special interests of its major donors of \$50,000 or more, in descending order based on the amount contributed to the committee. The list of these economic or special interests may not be interspersed with constituencies such as "concerned citizens, or consumers."
- The name of any state or local candidate that contributes \$50,000 or more.

**Recalls:** Each committee established for a recall election must include the name of the officeholder subject to the recall. If the committee is not controlled by the officeholder, the committee must state its support or opposition (e.g., Committee Opposing the Recall of Council Member Doe).

**Supporting or Opposing a Candidate:** The name of each committee primarily formed to support or oppose a state or local candidate(s) being voted on in a single election, other than a recall election, must include the last name of each candidate, the office sought, the year of the election and must state whether the committee supports or opposes the candidate(s) (e.g., Committee to Support Doe for Senate 20XX).

| Statement of Organization Recipient Committee  |                                     | CALIFORNIA 410  |               |                  |                                       |  |
|--|-------------------------------------|---|---------------|------------------|---------------------------------------|--|
| INSTRUCTIONS ON REVERSE  |                                     | Page 2  |               |                  |                                       |  |
| COMMITTEE NAME   |                                     |   |               |                  | I.D. NUMBER                           |  |
| All committees must list the financial institution where the campaig   | n bank account is located.          |   |               |                  |                                       |  |
| NAME OF FINANCIAL INSTITUTION  | AREA CODE/PHONE                     | BANK AC   | COUNT NUMBER  |                  |                                       |  |
| ADDRESS  | CITY                                | STATE   | Z             | P CODE           |                                       |  |
| 4. Type of Committee Complete the applicable sections.   |                                     |   |               |                  |                                       |  |
| Controlled Committee   |                                     |   |               |                  |                                       |  |
| <ul> <li>List the name of each controlling officeholder, candidate, or sta<br/>district number, if any, and the year of the election.</li> </ul> | ate measure proponent. If candi     | date or officeholde   | r controlled, | also list the el | ective office sought or held, and     |  |
| • List the political party with which each officeholder or candida   | te is affiliated or check "nonparti | san." Stating "No p   | arty prefere  | nce" is accepta  | ble.                                  |  |
| If this committee acts jointly with another controlled committee   | ee, list the name and identificatio | n number of the ot  | her controlle | ed committee.    |                                       |  |
| NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT   |                                     | ELECTIVE OFFICE SOUGHT OR HELD YEAR (INCLUDE DISTRICT NUMBER IF APPLICABLE) ELECT |               |                  |                                       |  |
|  |                                     |   |               | Nonpartisan      | Partisan (list political party below) |  |
|  |                                     |   |               | Nonpartisan      | Partisan (list political party below) |  |
| Primarily Formed Committee Primarily formed to support of  | r oppose specific candidates or m   | easures in a single   | election. Lis | t below:         | I                                     |  |
| CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR IF A RECALL. STATE "RECALL" IN FRONT OF THE OFFICEHOLDER'S NAM                 |                                     | TE(S) OFFICE SOUGHT OF<br>CLUDE DISTRICT NO CIT                                   |               |                  | N CUECK ONE                           |  |

SUPPORT

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OPPOSE

OPPOSE

# 2. Treasurer and Other Principal Officers:

A committee may have only one treasurer and one assistant treasurer. A candidate may be his or her own treasurer or assistant treasurer. A committee may not accept a contribution or make an expenditure without a treasurer.

A committee that is not controlled by a candidate or officeholder must disclose the name, street address, and telephone number of the committee's principal officer(s). The principal officer(s) of a committee are the individual(s) primarily responsible for approving the political activity of the committee, including authorizing the content of communications, authorizing contributions and other expenditures, and determining strategy. If more than three individuals qualify as principal officers of the committee, identify no fewer than three.

If no individual other than the committee treasurer qualifies as a principal officer, identify that individual as both the treasurer and the principal officer. An attachment may be necessary.

# 3. Verification/Original Ink Signature(s):

The Form 410 filed with the Secretary of State must contain an original signature(s). The committee treasurer or assistant treasurer must sign the Form 410. Also, each controlling officeholder, candidate or state ballot measure proponent must sign the Form 410. If more than three control the committee, one of them may sign on behalf of all controlling individuals. If a candidate will serve as his or her own treasurer, he or she must sign as the candidate and again as the treasurer.

## **Bank Account Information**

- Qualified committees must list the name and address of the financial institution where the campaign bank account is located and the bank account number.
- Non-qualified committees are not required to open a bank account.

# 4. Type of Committee:

## **Controlled Committee**

A "controlled committee" is one which is controlled directly or indirectly by an officeholder, candidate, or state measure proponent, or which acts jointly with an officeholder, candidate, state measure proponent, or another controlled committee in connection with making expenditures.

A committee is controlled if the officeholder, candidate, or proponent, his/her agent, or any other committee he/she controls, has a significant influence on the actions or decisions of the committee.

"Proponents" of state measures are persons who request the Attorney General to prepare a title and summary of a state initiative, referendum, or measure.

**Candidate Election Committee:** Identify the candidate's last name, office, election year and party, if applicable.

Ballot Measure Committee Controlled by State Candidate: Identify each measure on which the committee has spent or anticipates spending \$50,000 or more in the current two-year period, beginning with January 1 of an odd-numbered year. If the ballot designation has not been assigned, describe the purpose of the anticipated measure(s). Amend the Form 410 when a ballot designation is assigned. Provide this information in the primarily formed or general purpose section or on an attachment.

**Legal Defense Committee:** On an attachment, describe the specific legal dispute(s) for which the legal defense fund was established. The Form 410 must be amended within 10 days when legal disputes are either resolved or new disputes are initiated.

# **Primarily Formed Committee**

A committee is "primarily formed" when it makes or initially plans to make more than 70% of its contributions and expenditures to support or oppose a specific candidate or measure, or a group of measures or specific local candidates all being voted upon in the same election on the same date. (FPPC Regulation 18247.5)

New committees: A new committee formed within six months of a statewide regular election or within 30 days of a state special election is presumed to be primarily formed if the committee makes at least \$25,000 in independent expenditures to support or oppose a state candidate or measure. Monthly review is required for other new committees that spend at least \$1,000 a month and were formed within six months of an election in connection with which the committee makes contributions or expenditures.

Quarterly review at the end of March, June, September and December is required for other committees.

A committee controlled by a candidate for his or her own candidacy is not a primarily formed committee.

**State ballot measures - qualification ID number:** Certain committees must list in Section 4, Primarily Formed Committee, the Attorney General's Office assigned identification number to a proposed state ballot measure:

- A committee submitting the title and summary;
- A committee primarily formed for the measure; or
- A committee that spends \$100,000 or more on petition circulation for the measure.

**Recall Committees:** A committee supporting or opposing a recall must list "Recall [Officeholder's Name]," the office held by the recall target officeholder, and mark the appropriate box to indicate whether the committee supports or opposes the recall of the officeholder.

# **Statement of Organization Recipient Committee**

|   | FORNIA | 410 |
|---|--------|-----|
| F | ORM    | 410 |

| •   |                 |
|---|-----------------|
| INSTRUCTIONS ON REVERSE   | Page 3          |
| COMMITTEE NAME  | I.D. NUMBER     |
| 4. Type of Committee (Continued)  |                 |
| General Purpose Committee  Not formed to support or oppose specific candidates or measures in a single election. Check only one is ☐ CITY Committee ☐ COUNTY Committee ☐ STATE Committee ☐ Political Party/Central Commit |                 |
| PROVIDE BRIEF DESCRIPTION OF ACTIVITY   |                 |
| Sponsored Committee List additional sponsors on an attachment.  |                 |
| NAME OF SPONSOR INDUSTRY GROUP OR AFFILIATION OF SPONSOR  |                 |
| STREET ADDRESS NO. AND STREET CITY STATE ZIP CODE   | AREA CODE/PHONE |
| Small Contributor Committee   |                 |

# 5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
- This committee does not anticipate receiving contributions or making expenditures in the future;

Date qualified

- This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
- This committee has no surplus funds; and
- This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
  - -- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
  - -- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.

## **General Purpose Committee**

A committee is a "general purpose committee" if its principal activity is supporting or opposing a variety of candidates or measures voted on in different elections. (FPPC Regulation 18227.5)

- A state committee makes contributions or expenditures to support or oppose candidates or measures voted on in state elections, or in more than one county; it does not make over 70% of its contributions or expenditures in a single local jurisdiction. State contributions include contributions to other state general purpose committees. All political party committees that meet the requirements as a political party pursuant to Elections Code Section 5100 (Government Code Section 85205) (including county central committees) are state committees.
- A county committee makes more than 70% of its contributions or expenditures to support or oppose candidates or measures voted on in a single county, or in more than one jurisdiction within one county. This includes contributions to other general purpose committees in the same county.
- A city committee makes more than 70% of its contributions or expenditures to support or oppose candidates or measures voted on in a single city, or in one consolidated city and county. This includes contributions to other city general purpose committees in the same city.

A city or county committee may make up to four contributions in a calendar year to candidates for elective state office whose districts are within the same jurisdiction and is not required to change its status to a state committee.

A committee that has made contributions or expenditures of \$5,000 or more during a quarter must review its activity at the end of March, June, September and December to determine if the committee is filing reports in the appropriate

jurisdiction. During the first six months, a new committee must check its jurisdictional status each month the committee makes expenditures of \$1,000 or more. If a change of filing locations occurs, reports must be filed in both the new and old jurisdiction through the calendar year.

After marking the appropriate state, county or city box, provide a brief description of the committee's political activities such as whether it supports candidates or measures that share a common political affiliation.

### **Sponsored Committee**

A "sponsored committee" is a general purpose or primarily formed committee, other than an officeholder or candidate controlled committee, that has one or more sponsors.

An organization, business, or other entity is a sponsor if one or more of the following apply:

- The committee receives 80% or more of its contributions from the entity or organization or its members, officers, employees, or shareholders.
- The entity or organization collects contributions for the committee by use of payroll deductions or dues from its members, officers or employees.
- The entity or organization, alone or in combination with other entities or organizations, provides all or nearly all of the administrative services for the committee.
- The entity or organization, alone or in combination with other entities or organizations, sets the policies for contribution solicitations or payment of expenditures from committee funds.

See the instructions for Part 1 for a sponsored committee's name requirements.

#### **Small Contributor Committee**

A "small contributor committee" is one that has been in existence for more than six months; receives

contributions from 100 or more persons; makes contributions to five or more candidates; and has not received more than \$200 from one person in a calendar year.

## 5. Termination Requirements

Recipient committees may only terminate when:

- They have ceased to receive contributions and make expenditures; and
- They do not anticipate receiving contributions, repayments of outstanding loans made to others, or any other receipts in the future, and they do not anticipate making expenditures in the future; and
- They have eliminated or have no intention or ability to discharge all their debts, loans received, and other obligations; and
- They have no funds; and
- They have filed all required campaign statements disclosing all reportable transactions, including disposition of funds.

**State Candidates:** There are mandatory termination deadlines applicable to your committees.

#### **How to Terminate**

After the Termination Requirements above are met:

**State Committees:** Complete page one of the Form 410 and mark the termination box. Send the Form and last Form 450 or 460 (mark the termination box) to the Secretary of State.

**Local Committees:** Complete page one of the Form 410, mark the termination box and send the Form to the Secretary of State. Send a copy of the Form 410 and last Form 450 or 460 (mark the termination box) to your city or county filing officer.