Form **8872**
(November 2002)
Department of the Treasury
Internal Revenue Service

Political Organization Report of Contributions and Expenditures

▶ See Seperate instructions.

OMB No 1545-1696

A For the period beginning APRIL 1, 20 13 and ending JUNE 30, 20 13

B Check applicable boxes ☒ Intial report ☐ Change of address ☐ Amended report ☐ Final report

1 Name of organization: INDEPENDENCE NATIONAL COMMITTEE

Employer identification number: 74 3182399

2 Mailing address (P O Box or number, street, and room or suite number): P.O. BOX 010950

City or town, state, and ZIP code: MIAMI, FL 33101

3 E-mail address of organization

4 Date organization was formed: 7·11·06

5a Name of custodian of records: DAVID POWELL

5b Custodian's address: P.O. BOX 010950 MIAMI, FL 33101

6a Name of contact person: DAVID POWELL

6b Contact person's address: SAME AS ABOVE

7 Business address of organization (if different from mailing address shown above) Number, street, and room or suite number

City or town, state, and ZIP code

8 Type of report (check only one box)

a ☐ First quarterly report (*due by April 15*)

b ☒ Second quarterly report (*due by July 15*)

c ☐ Third quarterly report (*due by October 15*)

d ☐ Year-end report (*due by January 31*)

e ☐ Mid-year report (*Non-election year only-due by July 31*)

f ☐ Monthly report for the month of _____ (*due by the 20th day following the month shown above, except the December report, which is due by January 31*)

g ☐ Pre-election report (*due by the 12th or 15th day before the election*)
(1) Type of election _____
(2) Date of election _____
(3) For the state of _____

h ☐ Post-general election report (*due by the 30th day after general election*)
(1) Date of election _____
(2) For the state of _____

9 Total amount of reported contributions (total from all attached **Schedules A**)	9	0
10 Total amount of reported expenditures (total from all attached **Schedules B**)	10	0

Sign Here

Under penalties of perjury, I declare that I have examined this report including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete

▶ David Powell — Signature of authorized official ▶ 7·5·13 — Date

For Paperwork Reduction Act Notice, see separate instructions Cat No 30406G Form **8872** (11-2002)

ENVELOPE POSTMARK DATE JUL 0 6 2013

SCANNED JUN 3 0 2013

RECEIVED JUL 0 8 2013 OGDEN, UT 811 IRS-OSC

Schedule A **Itemized Contributions**

Schedule A page 1 of 1

Name of organization: INDEPENDENCE NATIONAL COMMITTEE

Employer identification number: 74 3182399

Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer / Contributor's occupation / Aggregate contributions year-to-date ▶ $	Amount of contribution $ / Date of contribution

Subtotal of contributions reported on this page only. Enter here and also include this amount in the total on line 9 of Form 8872 ▶ $

Form 8872 (11-2002)

Schedule B Itemized Expenditures

Schedule B page 1 of 1

Name of organization: INDEPENDENCE NATIONAL COMMITTEE

Employer identification number: 74-3182399

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		

Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872 . . . . . ▶ $ 0