

Political Organization Report of Contributions and Expenditures

▶ See separate instructions.

A For the period beginning 11/01/2025 **and ending** 11/30/2025

B Check applicable box: Initial report Change of address Amended report Final report

1 Name of organization End Citizens United Nonfederal
Employer identification number 81 - 0870857

2 Mailing address (P.O. box or number, street, and room or suite number)
PO Box 66005 Ste 1050

City or town, state, and ZIP code
Washington, DC 20035

3 E-mail address of organization: no@email
4 Date organization was formed: 12/30/2015

5a Name of custodian of records Kimberly Coleman
5b Custodian's address PO Box 66005
Washington, DC 20035

6a Name of contact person Mark Andrews
6b Contact person's address PO Box 66005
Washington, DC 20035

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
PO Box 66005 Ste 1050

City or town, state, and ZIP code
Washington, DC 20035

8 Type of report (check only one box)

- First quarterly report (due by April 15)
- Second quarterly report (due by July 15)
- Third quarterly report (due by October 15)
- Year-end report (due by January 31)
- Mid-year report (Non-election year only-due by July 31)
- Monthly report for the month of: November (due by the 20th day following the month shown above, except the December report, which is due by January 31)
- 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:
- Post-general election report (due by the 30th day after general election)
 - (1) Date of election:
 - (2) For the state of:

Schedule A Itemized Contributions

Schedule A

Contributor's name, mailing address and ZIP codeAggregate below Threshold
PO Box 66005 Ste 1050
Washington, DC 20035**Name of contributor's employer**

NA

Contributor's occupation

NA

Aggregate contributions year-to-date

\$ 207504

Amount of contribution

\$ 207504

Date of contribution

11/30/2025

Schedule B Itemized Expenditures	Schedule B
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Recipient's name, mailing address and ZIP code Aggregate below Threshold PO Box 66005 Ste 1050 Washington, DC 20035	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 198467 Date of expenditure 11/30/2025
Purpose of expenditure Aggregate below Threshold		

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.

Kimberly Coleman

12/20/2025

**Sign
Here**



Signature of authorized official



Date
