

1.) CORPORATION NAME: **THE AMERICAN IDEAS INSTITUTE** DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **DANIEL MCCARTHY** SCC ID NO: **F1800921**
809 N ABINGDON ST
ARLINGTON, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
CA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1710 Rhode Island Ave
Suite 1200

CITY/ST/ZIP: WASHINGTON, DC 20036

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	WICK ALLISON	
TITLE:	P/CEO	
ADDRESS:	750 N SAINT PAUL ST #2100	
CITY/ST/ZIP/CO:	DALLAS, TX 75201	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RONALD BURR	
TITLE:	SECRY/TREAS	
ADDRESS:	1710 RHODE ISLAND AVE NW SUITE 1200	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DANIEL MCCARTHY	
TITLE:	EX DIRECTOR	
ADDRESS:	1710 RHODE ISLAND AVE NW SUITE 1200	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	PATRICK J BUCHANAN	
TITLE:	DIRECTOR	
ADDRESS:	1710 RHODE ISLAND AVE NW SUITE 1200	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MICHAEL DESCH	
TITLE:	DIRECTOR	
ADDRESS:	1710 RHODE ISLAND AVE NW SUITE 1200	
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM LIND DIRECTOR 1710 RHODE ISLAND AVE NW SUITE 1200 WASHINGTON, DC 20036	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT MCCONNELL DIRECTOR 1710 RHODE ISLAND AVE NW SUITE 1200 WASHINGTON, DC 20036	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JON UTLEY DIRECTOR 1710 RHODE ISLAND AVE NW SUITE 1200 WASHINGTON, DC 20036	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ RONALD BURR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	RONALD BURR, SECRY/TREAS PRINTED NAME AND CORPORATE TITLE	8/20/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			