Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF

01 AUG 13

## **LOBBYING REPORT**

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

I. Registrant Name Reed Smith			
<ol> <li>Address</li></ol>	1100 - East Towe	r, Washington, DC 2000	)5
City:	State/2	Lip (or Country)	
4. Contact Name Phillips S. Peter	Telephone 202-414-9258	E-mail (optional)	5. Senate II 32932-
7. Client Name Self Federated Investors, Inc.			6. House ID 303020
10. Check if this is a Termination Repo			11. No Lobb
12. Lobbying Fit	rms	13. Organizations	
INCOME relating to lobbying activiti period was:	es for this reporting	EXPENSES relating to lobbying period were:	ng activities for thi
Less than \$10,000		Less than \$10,000 🔲	
\$10,000 or more	the client (including all	\$10,000 or more	ctions for description ounts using LDA description ounts under section oue Code ounts under section
Signature Philipping	epi 5. Ster	ncol 70-4 of C	. D. 1

Filing #01992284-d687-441d-9c0b-f322e88d510d - Page 1 of 4

Registrant Name	Reed Smith	Client Name	Federated I	nvestors, Inc.
engaged in lobbyi	TIVITY. Select as many ing on behalf of the client quested. Attach additional	during the reporting pe		
15. General issue	e area code FIN	(one per page)		
16. Specific lobb	ying issues			
Financial	Issues			÷
		•		
	Congress and Federal agen	cies contacted	Check if No	one
	ates Senate e of Representatives			
18 Name of each	h individual who acted as	n labbreigt in this issue		
18. Name of each	h individual who acted as a	a lobbyist in this issue		Ticial Position (if applicable)
18. Name of each	Name	a lobbyist in this issue		Ticial Position (if applicable)
	Name	a lobbyist in this issue		Ticial Position (if applicable)
	Name Peter	a lobbyist in this issue		Yicial Position (if applicable)
	Name Peter			Ticial Position (if applicable)
	Name Peter			Ficial Position (if applicable)
	Name Peter			ficial Position (if applicable)
	Name Peter			Ticial Position (if applicable)
Phillips S.	Name Peter		Covered Of	
Phillips S.	Name Peter		Covered Of	ficial Position (if applicable)