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Washington, DC 20515

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232 Hart Building
Washington, DC 20510

SECRETARY OF
03 FEB 14

LOBBYING REPORT

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

1. Registrant Name Holland & Knight LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 2099 Pennsylvania Avenue, NW Suite 100 Washington, D.C. 20006			
3. Principal Place of Business (if different from line 2) City: Washington, DC State/Zip (or Country) 20006			
4. Contact Name Robert H. Bradner	Telephone 202-457-7004	E-mail (optional) rbradner@hkllaw.com	5. Senate ID 18466-
7. Client Name <input type="checkbox"/> Self Independence Square Foundation			6. House ID 30825-

TYPE OF REPORT 8. Year 2002 Midyear (January 1- June 30) OR Year End (July 1-Dec

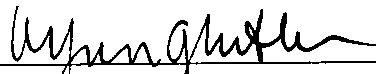
9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report ⇒ Termination Date _____

11. No Lobbyin

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organization
<p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>40,000</u> Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p>EXPENSES relating to lobbying activities for t period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 ore more <input type="checkbox"/> ⇒ \$ _____ Expenses (near</p> <p>14. REPORTING METHOD. Check box to inc accounting method. See instructions for descripti</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA d</p> <p><input type="checkbox"/> Method B. Reporting amounts under secti of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under secti Internal Revenue Code</p>

Signature 

Printed Name and Title Lynn G. Cutler, Senior Policy Advisor

Registrant Name Holland & Knight LLP Client Name Independence Square Foundation

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each cod information as requested. Attach additional page(s) as needed.**

15. General issue area code HOU (one per page)

16. Specific lobbying issues

Funding for programs for developmentally disabled.

17. House(s) of Congress and Federal agencies contacted Check if None

U.S. House of Representatives
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Lynn G. Cutler	Deputy Assistant to the President
Robert H. Bradner	AA & Counsel, Honorable John Porter
Richard Gold	
Gary Pannone	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Registrant Name Holland & Knight LLP Client Name Independence Square Foundation

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each code** information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

Funding for programs for developmentally disabled.

17. House(s) of Congress and Federal agencies contacted Check if None

U.S. House of Representatives
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Lynn G. Cutler	Deputy Assistant to the President
Robert H. Bradner	AA & Counsel, Honorable John Porter
Richard Gold	
Gary Pannone	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Registrant Name Holland & Knight LLP Client Name Independence Square Foundation

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each code** information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues

Funding for programs for developmentally disabled.

17. House(s) of Congress and Federal agencies contacted Check if None

U.S. House of Representatives
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Lynn G. Cutler	Deputy Assistant to the President
Robert H. Bradner	AA & Counsel, Honorable John Porter
Richard Gold	
Gary Pannone	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Registrant Name Holland & Knight LLP Client Name: Independence Square Foundation

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address	
21. Client new principal place of business (if different from line 20)	
City	State/Zip (or County)
22. New general description of client's business or activities	

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of E (city and state or c

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal Place of Business (city and state or country)	Amount of contribution for lobbying activities	Owners i

28. Name of each previously reported foreign entity that **no longer** owned, **or** controls, **or** is affiliated with the registrant or affiliated organization

Signature _____ Date _____

WAS1 #1108881 v2