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

Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



LOBBYING REGISTRATION Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration				1. Effective Date of Registration10/01/2		
2. House Identification Number		36473	Senate l	Senate Identification Number		
REGIST 3. Registra		ch Feuer Group		**************************************		
Address	1133 Connecticut Ave.,	NW		Fifth Floor		
City	Washington			Zip 20036	l	
	al place of business (if diff					
· City		Sta	te	Zip	•	
5. Telepho	ne number and contact nar		,			
	(202) 429-6881	Contact Mr. N	Mitchell Feuer	E-mail mitchell.feuer@rfg	dc.com	
6. General Lobbyir	description of registrant's	business or activity	ties			
7. Client n	A Lobbying firm is required to fill labeled "Self" and proceed to lin ame Ad hoc coalition of 1133 Connecticut Ave., 1	e 10. □ Self hedge fund mana NW Fifth Floor	gers	nizations employing in-house lobbyis		
City	Washington	Sta	te DC	Zip 20036	••	
8. Principa	al place of business (if diff	erent than line 7)				
City	•	Sta	te	Zip °		
	description of client's bus	iness or activities			•••••••••••••••••••••••••••••••••••••••	
section a lobby	f each individual who has act has served as a "covered exec ist for the client, state the exe Name	cutive branch officia	ll" or "covered leg ative position(s) i	or the client identified on line 7 gislative branch official" within In which the person served. Covered Official Position (if ap	n two years of	
Peter	Rich	eas for	', ·s			
Mitchell	Feuer	1	NACTORS OF STREET	Dente de la companya della companya	^^ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	

Registrant Name Rich Feuer Group		Client Name Ad hoc coali	tion of hedge fund manage		
LOBBYING ISSUES 11. General lobbying issue areas.	Select all applicable codes l	listed in instructions and on the r	everse side of Form LD-1		
FIN					
12. Specific lobbying issues (curre Regulation of hedge fund management)	• •				
AFFILIATED ORGAN 13. Is there an entity other than th a semiannual period and in w	e client that contributes mo	re than \$10,000 to the lobbying supervises or controls the registr			
No ⇔ Go to line 14.	Yes⇔	Yes Complete the rest of this section for each entity match criteria above, then proceed to line 14.			
Name	A	ddress	Principal place of Busi (city and state or cou		
Taconic Capital Advisors	450 Park Avel New York	nue, Ninth Floor NY 10022	New York NY		
b) directly or indirectly the client or any or	equitable ownership in the o ly, in whole or in major part ganization identified on line	client or any organization identif , plans, supervises, controls, dire : 13; OF identified on line 13 and has a d	ects, finances or subsidizes		
No ⇒ Sign and date the	registration.	-	st of this section for each enteria above, then sign and o		
Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities		
Signature Mutc	hell Fener	Date	11/14/06		

LD-1DS (Rev. 4.07)

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