

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
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LOBBYING REPORT

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

1. Registrant Name			
NIXON PEABODY LLP			
2. Address <input type="checkbox"/> Check if different than previously reported			
401 9 th Street, N.W., Suite 900			
3. Principal Place of Business (if different from line 2)			
City	Washington	State/Zip (or County)	D.C. 20004
4. Contact Name	Telephone	E-mail (optional)	5. Senat
Randall Kelly	(202) 585-8000		30952-
7. Client Name	<input type="checkbox"/> Self		6. Hous
NEW YORK STATE HOUSING FINANCE AGENCY			30907C

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) **OR** Year End (July 1-December 31)

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 Lobbying Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)
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).	14. REPORTING METHOD. Check box to indicate reporting method. See instructions for descriptions.
	<input type="checkbox"/> Method A. Reporting amounts using LDA Code
	<input type="checkbox"/> Method B. Reporting amounts under section 170(e) of the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 170(e) of the Internal Revenue Code

Signature 
Printed Name and Title STEPHEN J. WALLACE, PARTNER

Registrant Name NIXON PEABODY LLP

Client Name NEW YORK STATE HOUSING FINA

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

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

16. Specific lobbying issues

Section 8, preservation, HUD appropriations

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. House of Representatives

U.S. Senate

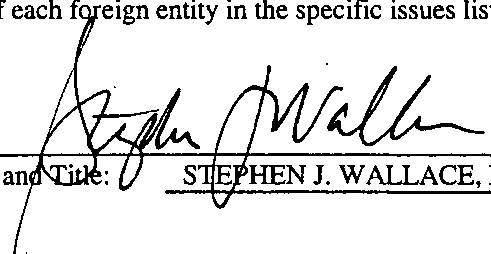
18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Stephen J. Wallace	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature



Date

2/28/05

Printed Name and Title: STEPHEN J. WALLACE, PARTNER

Registrant Name NIXON PEABODY LLP

Client Name NEW YORK STATE HOUSING FINA

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 Country)

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 (city and state or

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	Owner

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

Signature _____ Date _____

Printed Name and Title _____

