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LOBBYING REPORT

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

1. Registrant Name Womble Carlyle Sandridge and Rice, PLLC			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1401 I Street, N.W., 7th Floor City Washington State/Zip (or Country) DC 20005 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Kevin Jones	Telephone (202) 467-6900	E-mail (optional) kjones@wcsr.com	5. Senate ID # 53505-13
7. Client Name <input type="checkbox"/> Self SAS Institute Inc.			6. House ID # 34959007

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

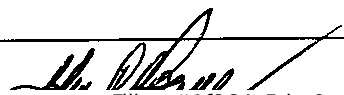
9. Check if this filing amends a previously filed version of this report


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

11. No Lobby

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: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ <small>Income (nearest \$20,000)</small> 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).	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> >> \$ _____ <small>Expenses (nearest \$2</small> 14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of <input type="checkbox"/> Method A. Reporting amounts using LDA defini <input type="checkbox"/> Method B. Reporting amounts under section 603 the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code



Signature  Date 2/11/2005

Printed Name and Title John Boyer - Administrator Pa