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LOBBYING REPORT

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

1. Registrant Name
ABRAHAM SCHNEIDER

2. Address Check if different than previously reported
5765 F BURKE CENTRE PARKWAY #6

3. Principal Place of Business (if different from line 2)
BURKE, VA 22
 City: _____ State/Zip (or Country) _____

4. Contact Name Telephone E-mail (optional) 5. Senate ID #
ABRAHAM SCHNEIDER 202-550-4431 _____

7. Client Name Self 6. House ID #
NATIONAL FEDERATION OF INDEPENDENT BUSINESS 319610

TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30) OR Year End (July 1-Decen

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 A

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<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>20,000</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 this report period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p>
<p>14. REPORTING METHOD. Check box to indicate ex accounting method. See instructions for description of op</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>	

Signature _____

Printed Name and Title _____



Registrant Name ABRAHAM SCHNOEIER Client Name NATIONAL FEDERATION OF INDEPENDENT BUSINESS

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 TAX (one per page)

16. Specific lobbying issues
ALL TAX ISSUES

17. House(s) of Congress and Federal agencies contacted Check if None
U.S. SENATE
HOUSE OF REPRESENTATIVES

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

Name	Covered Official Position (if applicable)
<u>ABRAHAM SCHNOEIER</u>	

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

Signature *Abraham Schneier* Date 8/14/01
Printed Name and Title ABRAHAM SCHNOEIER

