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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 12/3/2001
 2. House Identification Number _____ Senate Identification Number 6

REGISTRANT

3. Registrant name The Harbour Group, LLC
 Address 3000 K Street, NW, Suite 105
 City Washington State DC Zip 2000
 4. Principal place of business (if different from line 3)
 City _____ State/Zip (or Country) _____
 5. Telephone number and contact name
(202) 295-8787 Contact Joel Johnson E-mail (optional) _____
 6. General description of registrant's business or activities
Public Relations Firm

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check the box labeled "Self" and proceed to line 10. Self

7. Client name Major League Baseball Players Association ("MLBPA")
 Address 12 East 49th Street 24th Floor
 City New York State NY Zip 10017
 8. Principal place of business (if different from line 7)
 City _____ State/Zip (or Country) _____
 9. General description of client's business or activities
Labor Union

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
Joel Johnson	Senior Advisor to the President for Policy and Commu



LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p

GOV

12. Specific lobbying issues (current and anticipated)

Assist MLBPA in developing and implementing an appropriate public policy strategy.

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period **and** in whole or in major part plans, supervises or controls the registrant's lobbying activities?

- No ⇒ Go to line 14. Yes ↓ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or county)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **or**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or manages the lobbying activities of the client or any organization identified on line 13; **or**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the lobbying activity?

- No ⇒ Sign and date the registration. Yes ↓ Complete the rest of this section for matching the criteria above, then sign the registration.

Name	Address	Principal place of business	Amount of contribution for

Signature  Date 12/3

Printed Name and Title Joel Johnson, Managing Director

