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LOBBYING REPORT

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

1. Registrant Name GUSTAFSON ASSOCIATES			
2. Address <input type="checkbox"/> Check if different than previously reported 1175 RESTON AVENUE			
3. Principal Place of Business (if different from line 2) City HERNDON State/Zip (or Country) VA 20170			
4. Contact Name ROBERT C. GUSTAFSON		Telephone 703-450-9066	E-mail (optional)
7. Client Name <input type="checkbox"/> Self NATIONAL SPIRITUAL ASSEMBLY OF THE RAHA'S OF THE U.S.			5. Senate ID # 55495
			6. House ID # 35150

TYPE OF REPORT 8. Year 2001 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

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 reporting period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____
Income (nearest \$20,000)	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 accounting method. See instructions for description of method.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(c) Internal Revenue Code

Signature

Robert C. Gustafson

Printed Name and Title ROBERT C. GUSTAFSON, PRESIDENT

PA

Registrant Name GUSTAFSON ASSOCIATES Client Name NATIONAL SPIRITUAL ASSE

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which th engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each co information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Human rights issues affecting Beha'is.

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)
<u>Robert C. Gustafson</u>	

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

Check if None

Signature Robert C. Gustafson Date 2/8/02

Printed Name Robert C. Gustafson, President

Printed Name and Title ROBERT S. WOODRUFF, JR.

Form LB-2 (Rev. 6/98)

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