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LOBBYING REPORT

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

1. Registrant Name <i>Resource Management Consultants Inc.</i>	
2. Address <input type="checkbox"/> Check if different than previously reported. <i>205 S. Whiting St. Suite 308</i>	
3. Principal Place of Business (if different from line 2) City: <i>Alexandria</i> State/Zip (or Country) <i>VA 22304</i>	
4. Contact Name <i>Robert J. Gray</i>	5. Senate ID # <i>New</i>
Telephone <i>703-751-8022</i>	E-mail (optional)
6. Client Name <input type="checkbox"/> Self <i>National Cooperative Business Assoc.</i>	6. House ID # <i>New</i>

TYPE OF REPORT 8. Year *2000* 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 Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> => \$ _____ <small>Income (nearest \$20,000)</small></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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> => \$ _____ <small>Expenses (nearest \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Signature: *Robert J. Gray*
 Printed Name and Title: *Robert J. Gray, President*

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Resource Management
Registrant Name Consultants Inc Client Name National Cooperative Business Assoc.

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

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

16. Specific lobbying issues

Development of rural business cooperative equity fund

17. House(s) of Congress and Federal agencies contacted Check if None

House,
Senate

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

Name	Covered Official Position (if applicable)	New
<u>Robert J Gray</u>		<input type="checkbox"/>
<u>Peter Caldwell</u>		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Robert J Gray Date 8/14/2000
Printed Name and Title Robert J. Gray

Resource Management Consultants Inc. Client Name: National Cooperative Business Assoc.

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address: National Cooperative Business Assoc - 1401 New York Ave. N.W.
 21. Client new principal place of business (if different from line 20):
 City: Washington State/Zip (or Country): D.C. 20005-2160
 22. New general description of client's business or activities: Trade Association For Cooperatives

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) NA

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

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 NA

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client

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

Signature: Robert J. Gray Date: 8/14/2000
 Printed Name and Title: Robert J. Gray, President
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