

Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

SECRETARY OF THE
06 MAR -3 AM/1

LOBBYING REPORT

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

| | | | |
|---|-----------------|--|---------|
| 1. Registrant name | | | |
| Organization | | The Gallatin Group | |
| 2. Address <input type="checkbox"/> Check if different than previously reported | | | |
| Address 1 | | Suite 585 | |
| City | | State | Country |
| Washington | | DC | USA |
| 3. Principal place of business (if different than line 2) | | | |
| City | | State | Country |
| | | Zip Code | |
| City | | State/Zip or Country | |
| 4a. Contact Name | | b. Telephone number | |
| Prefix | Full Name | c. E-mail | |
| Ms. | Samantha Benton | (202) 220-1355 sbenton@gallatingroup.com | |
| 5. Senate ID # | | 15747-354 | |
| 7. Client Name <input type="checkbox"/> Self | | 6. House ID # | |
| St. Peter's Hospital | | 32408022 | |

TYPE OF REPORT 8. Year 2005 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

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000 ☐

\$10,000 or more ☒ ⇒ \$ 10,000

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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000 ☐

\$10,000 or more ☐ ⇒ \$ _____

14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of option

- ☐ **Method A.** Reporting amounts using LDA definitions only
- ☐ **Method B.** Reporting amounts under section 6033(b)(8) of Internal Revenue Code
- ☐ **Method C.** Reporting amounts under section 162(e) of the Revenue Code

Form Cor

Printed Name and Title Samantha Benton, Associate

0000140978




Registrant Name The Gallatin GroupClient Name St. Peter's Hospital

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 HCR - Health Issues (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue 

Secure federal funding for hospital expansion

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 Add a page to continue adding lobbyists for this issue

| First Name | Name Last Name | Suffix | Covered Official Position (if applicable) |
|------------|-------------------|--------|---|
| Will | Hollier | | |
| Zak | Andersen | | Chief of Staff, Senator Max Baucus |
| Samantha | Benton | | |
| John | Etchart | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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

Add a page for a different issue



Registrant Name The Gallatin GroupClient Name St. Peter's Hospital**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

Address

City

State

Zip Code

Country

21. Client new principal place of business (if different than line 20)

City

State

Zip Code

Country

22. New general description of client's business or activities

LOBBYIST UPDATE23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

First Name

Last Name

Suffix

First Name

Last Name

Suffix

1

Samantha

Benton

3

2

4

ISSUE UPDATE24. General lobbying issues that **no longer** pertain

Find the code to select below.

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

| Name | Address | Principal place of Business (city and state or country) |
|------|---------|--|
| | Address | City |
| | C/S/Z | State |
| | Address | Country |
| | C/S/Z | City |
| | | State |

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

1

2

3

FOREIGN ENTITIES

27. Add the following foreign entities

| Name | Street Address | Address | Principal place of business (city and state or country) | Amount of contribution for lobbying activities | Owner percen client |
|------|----------------|----------------|--|---|---------------------------|
| | City | State/Province | Country | | |
| | | | City | | |
| | | | State | | |
| | | | Country | | |

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

1

3

5

2

4

6

Add a page for more up

Printed Name and Title Samantha Benton, Associate



Sam 2/10/26