

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 SENATE

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H. D.

## LOBBYING REPORT

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

1. Registrant Name Akin, Gump, Strauss, Bauer & Feld, L.L.P.			
2. Address <input type="checkbox"/> Check if different than previously reported 1333 New Hampshire Avenue, NW			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20036			
4. Contact Name Steven R. Ross		Telephone	5. Senate ID # 682-280
7. Client Name <input type="checkbox"/> Self Citizens Educational Foundation, Inc.		E-mail (optional)	6. House ID # 31784073

**TYPE OF REPORT** 8. Year 1999 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 ☐  $\Rightarrow$  Termination Date \_\_\_\_\_

11. No Lobbying Activity ☐

### 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 type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> $\Rightarrow$ \$ 180,000 Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> $\Rightarrow$ \$ _____ Income (nearest \$20,000)
14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.	
<input type="checkbox"/> Method A. Reporting amounts using LDA definitions only	
<input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code	
<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code	

Signature \_\_\_\_\_

Printed Name and Title Steven R. Ross, Partner

Registrant Name Akin, Gump, Strauss, Hauer & Feld, L.L.P. Client Name Citizens Educational Foundation, Inc.

**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 GOV (one per page)

16. Specific lobbying issues

Puerto Rico political status

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

U.S. House of Representatives  
U.S. Senate  
Office of the White House

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

Name	Covered Official Position (if applicable)	New
Marlene M. Colucci		<input type="checkbox"/>
Gary A. Heinberg		<input type="checkbox"/>
Steven R. Ross		<input type="checkbox"/>
C. Stevens Seale		<input type="checkbox"/>
Barney J. Skladany, Jr.		<input type="checkbox"/>
José Villarreal		<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



Date February 14, 2000

Printed Name and Title Steven R. Ross, Partner

**Information Update Page – Complete ONLY where registration information has changed.**

20. Client new address

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

City: \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

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

**LOBBYIST UPDATE**

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

C. Stevens Seale

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organizations(s)

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

Name	Address	Principal place of business (city and state or country)	Amount of contribution if more than \$10,000	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 \_\_\_\_\_

Date February 14, 2000

Printed Name and Title Steven R. Ross, Partner