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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 3/1/2001

2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

### REGISTRANT

3. Name of Registrant **American Continental Group, Inc.**  
Address **2099 Pennsylvania Avenue, NW**  
City **Washington** State **DC** Zip **20006**  
4. Principal place of business (if different from line 3)  
City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_  
5. Telephone number and contact name  
**(202) 419-2500** Contact **Anne Campbell** E-mail (optional) **Campbell@acgrep.com**  
6. General description of registrant's business or activities  
**Political Consultants**

### CLIENT

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

7. Name of Client **Food Marketing Institute**  
Address **655 15th Street, SW, Suite 700**  
City **Washington** State **DC** Zip **20005**  
8. Principal place of business (if different from line 1)  
City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_  
9. General description of client's business or activities  
**food marketing**

### LOBBYISTS

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

Name	Covered Official Position (if applicable)
<b>Smealie, Shawn</b>	
<b>Metzner, David</b>	
<b>Terpsik, Peter</b>	
<b>Coloyas, Steve</b>	

**LOBBYING ISSUES**

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

**FOO TAX**

12. Specific lobbying issues (current and anticipated)

**Food Industry Safety, Death Tax**

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in 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 country)

**FOREIGN ENTITIES**

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or in any organization identified on line 13; or
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes the 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 outcome of the lobbying activity.

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

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

Signature *Shawn H. Smealie*

Date 4/13/2001

Printed Name and Title **Shawn H. Smealie** **Managing Director**