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RECEIVED.  
SECRETARY OF THE SENATE  
05 JUL 20 PM 1:24  
05 FEB 11 PM 12:50  
**LOBBYING REPORT**

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

1. Registrant name			
Organization		HC Associates, Inc.	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1 1100 15th Street, N.W., Suite 900			
City	Washington	State	DC
Zip Code	20005	Country	U
3. Principal place of business (if different than line 2)			
City		State	
		Zip Code	
		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Howard Cohen	(202) 441-0161	hcohen@hjclaw.com
7. Client Name <input type="checkbox"/> Self		5. Senate ID #	
Pharmaceutical Research and Manufacturers Association		65497-	
		6. House ID #	
		35598	

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30) ☐ OR Year End (July 1-December) ☐

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 A ☐

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p align="center"><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>200,000</u></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 align="center"><b>13. Organizations</b></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"/> ⇨ \$ _____</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(c) Revenue Code</p>
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**Form**

Printed Name and Title Howard Cohen - President

*Howard Cohen 2/14/2005*



Registrant Name HC Associates, Inc.Client Name Pharmaceutical Research and Mar

**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 as requested. Attach additional page(s) as needed.

15. General issue area code MMM - Medicare/Medicaid (one per page)

16. Specific lobbying issues

*Add page to continue specific issues description for this issue*

P.L. 108-173: Medicare Prescription Drug, Improvement, and Modernization Act of 2003

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

House of Representatives

Senate

~~Executive Branch~~

Department of Health and Human Services

- Office of Management and Budget  
- National Economic Council of  
the White House

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

*Add page to continue listing lobbyists for this issue*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Howard	Cohen	Mr.	

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

Printed Name and Title Howard Cohen - President

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*Howard Cohen 2/14/11*



Registrant Name HC Associates, Inc.Client Name Pharmaceutical Research and Ma

**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 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*

P.L. 108-173: Medicare Prescription Drug, Improvement, and Modernization Act of 2003. Reimportation of prescription drugs from foreign countries.

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

House of Representatives  
Senate  
~~Executive Branch~~  
Department of Health and Human Services

- Office of Management and Budget  
- National Economic Council of the White House

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists if*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Howard	Cohen	Mr.	

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

Printed Name and Title Howard Cohen - President

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Client Name **Pharmaceutical Research and Manu**

15. General issue area code INS - Insurance (one per page)

Add page to continue specific issues description for this issue

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

- Office of Management and Budget
- National Economic Council of the White House

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists if necessary*

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

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Registrant Name HC Associates, Inc.Client Name Pharmaceutical Research and Mar**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 UPDATE**23. 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

1

3

2

4

**ISSUE UPDATE**

Find the code to select below.

24. General lobbying issues that **no longer** pertain**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 Country
	Address	City
	C/S/Z	State Country

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 City	Address State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
			City	
			State Country	

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

1

3

5

2

4

6

Add a page for each

Printed Name and Title Howard Cohen - President*Howard Cohen 2/11*

