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LOBBYING REPORT

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

1. Registrant name
Christopher Reeve Foundation

2. Address Check if different than previously reported
636 Morris Turnpike Suite 3A
Short Hills NJ 07078 US

3. Principal place of business (if different than line 2)
City _____ State/Zip or Country _____

4a. Contact Name Mr. Michael Manganiello	b. Telephone number 973-379-2690	c. E-mail mmanganiello@christopherreeve.org	5. Senate ID # 61618-1
7. Client Name <input checked="" type="checkbox"/> Self Christopher Reeve Foundation			6. House ID # 3540700

TYPE OF REPORT 8. Year 2005 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 Acti

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

Printed Name and Title Michael Manganiello, Senior Vice President

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D 16:09 FAX 202 8875633

Registrant Name Christopher Reeve Foundation

Client Name Christopher Reeve Foundation

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

15. General issue area code SCI - Science/Technology (one per page)

16. Specific lobbying issues

Neurological Research Issues

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

U.S. House of Representatives
U.S. Senate

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

Name		Covered Official Position (if applicable)
Michael	Manganiello	
Tricia	Brooks	

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

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Printed Name and Title Michael Manganiello, Senior Vice President

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