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Aug. 22, 21

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LOBBYING REPORT

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

1. Registrant Name <i>CAPITAL ASSOCIATES, INCORPORATED</i>	
2. Address <input type="checkbox"/> Check if different than previously reported <i>44 SCHOOL STREET, SUITE 815</i>	
3. Principal Place of Business (if different from line 2) City: <i>BOSTON</i> State/zip (or Country) <i>MA 02108</i>	
4. Contact Name <i>EDWARD E. O'SULLIVAN</i>	Telephone <i>617-367-3113x11</i>
5. Senate ID #	
7. Client Name <input type="checkbox"/> Self <i>NIPMUC NATION TRIBAL COUNCIL</i>	6. House ID # <i>356300</i>

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-Decer)

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

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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)</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 period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opti</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature Edward E. O'Sullivan Date August 4, 21

Printed Name and Title EDWARD E. O'SULLIVAN, PRESIDENT

LD-2 (REV. 4/03)

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Registrant Name CAPITAL ASSOCIATES, INC Client Name NIPMUC NATION TRIB.

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

15. General issue area code IND (one per page)

16. Specific lobbying issues

ASSIST NIPMUC NATION IN PURSUIT OF FEDERAL RECOGNITION

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

HOUSE OF REPRESENTATIVES, SENATE & BUREAU OF INDIAN AFFAIRS

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

Name	Covered Official Position (if applicable)
EDWARD E. O'SULLIVAN	
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature Edward E. Sullivan Date 8/4/03

Printed Name and Title EDWARD E. O'SULLIVAN, PRESIDENT

