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| Clerk of the House of Representatives<br>Legislative Resource Center<br>B-106 Cannon Building<br>Washington, DC 20515 | Secretary of the Senate<br>Office of Public Records<br>232 Hart Building<br>Washington, DC 20510 |
|---|--|

SECRETARY OF THE SENATE

05 FEB 22 AM 10:30

**LOBBYING REPORT**

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

|   |  |  |                                   |
|---|--|--|-----------------------------------|
| 1. Registrant name<br><b>Risk and Insurance Management Society, Inc.</b>  |  |  |                                   |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br><b>655 Third Avenue</b> <b>2nd Floor</b><br><b>New York</b> <b>NY</b> <b>10017</b> <b>US</b> |  |  |                                   |
| 3. Principal place of business (if different than line 2)<br>City State/Zip or Country  |  |  |                                   |
| 4a. Contact Name<br><b>Mr. Anthony Silberfeld</b>   | b. Telephone number<br><b>212-655-6046</b> | c. E-mail<br><b>asilberfeld@rims.org</b> | 5. Senate ID #<br><b>33363-1.</b> |
| 7. Client Name <input checked="" type="checkbox"/> Self<br><b>Risk and Insurance Management Society, Inc.</b>   | 6. House ID #<br><b>3041700</b>            |  |                                   |

**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 Acti

**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 type="checkbox"/> ⇨ \$ _____   | \$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>40,000</u>   |
| 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). | 14. REPORTING METHOD. Check box to indicate appropriate accounting method. See instructions for description of options. |
|  | <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions of                                    |
|  | <input checked="" type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) Internal Revenue Code   |
|  | <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Revenue Code                        |

Edit &gt;

Signature



Date

2/11/05Printed Name and Title Anthony Silberfeld, Government Affairs Manager



Registrant Name Risk and Insurance Management Society, Client Name Risk and Insurance Management Sc

**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 INS - Insurance (one per page)

16. Specific lobbying issues

Extension of the Terrorism Risk Insurance Act (TRIA)  
Liability Risk Retention Act, amendments to original act to provide for formation of risk retention groups

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

Department of Treasury  
House of Representatives  
Senate

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

| Name               | Covered Official Position (if applicable) |
|--------------------|---|
| Anthony Silberfeld |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |
|                    |   |

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

Signature  Date 2/11/05







Registrant Name Risk and Insurance Management Society, Client Name Risk and Insurance Management So

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

20. Client new address

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

City

State/Zip

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

**ISSUE UPDATE**

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

LBR

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(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 for lobbying activities | Owns or controls or is affiliated with the registrant, affiliated organization |
|------|---------|---|--|--|
|      |         |   |  |  |

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

Signature  Date 2/11/05

Printed Name and Title Anthony Silberfeld, Government Affairs Manager

