

RECEIVED  
 SECRETARY OF THE SENATE  
 00 FEB 14 PM 4 04  
 HAND DELIVERED

# LOBBYING REPORT

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

1. Registrant Name <b>TRBA SENIOR CITIZENS LEAGUE (TSC)</b>	
2. Address <input checked="" type="checkbox"/> Check if different than previously reported <b>909 N. WASHINGTON ST. SUITE 300</b>	
3. Principal Place of Business (if different from line 2) City: <b>ALEXANDRIA</b> State/Zip (or County) <b>VA 22314</b>	
4. Contact Name <b>MICHAEL J ZABKO</b>	5. Senate ID # <b>38426-12</b>
Telephone <b>7035485568</b>	E-mail (optional)
7. Client Name <input type="checkbox"/> Self	6. House ID # <b>30677000</b>

TYPE OF REPORT 8. Year 99 Midyear (January 1-June 30)  OR Year End (July 1-December 31)

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 Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p><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 type="checkbox"/> ⇨ \$ _____  <small>Income (nearest \$20,000)</small></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><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 checked="" type="checkbox"/> ⇨ \$ <u>70,000</u>  <small>Expenses (nearest \$20,000)</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature Michael J. Zabko

Printed Name and Title MICHAEL J ZABKO EXECUTIVE DIRECTOR

Registrant Name TRSA Senior Citizens League Client Name \_\_\_\_\_

**LOBBYING ISSUES**

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

MMM CON PHA TAX HOV RGT

12. Specific lobbying issues (current and anticipated)

ATTACHED.

**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 any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes 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 Michael J. Zabko Date 10 Feb 00

Printed Name and Title MICHAEL J ZABKO EXECUTIVE DIRECTOR

Registrant Name TSCC

Client Name TREA SENIOR CITIZENS LEAGUE

**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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.R. 141 MEDICARE IMPROVEMENT ACT OF 1999  
S. 10 HEALTH PROTECTION AND ASSISTANCE FOR OLDER AMERICANS  
ADMINISTRATION'S MEDICARE REFORM PROPOSAL  
S. 1895 SSA/MEDICARE IMPROVEMENT

17. House(s) of Congress and Federal agencies contacted

Check if None

HOUSE OF REPRESENTATIVES  
U.S. SENATE  
WHITE HOUSE

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

Name	Covered Official Position (if applicable)	New
<u>MICHAEL J ZAGIBS</u>	<u>NA</u>	<input type="checkbox"/>
<u>MICHAEL OUBLETTE</u>		<input checked="" type="checkbox"/>
<u>MICHAEL PLUMER</u>		<input checked="" type="checkbox"/>
<u>KATHERINE M ANGIOLINO</u>		<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name T S C L

Client Name TRIA SENECA CITIZENS LEAGUE

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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.J. RES 33      U.S. FLAG PROTECTION  
S.J. RES 14      U.S. FLAG PROTECTION

17. House(s) of Congress and Federal agencies contacted

Check if None

HOUSE AND SENATE  
WHITE HOUSE

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

Name	Covered Official Position (if applicable)	New
<u>MICHAEL J ZABIKO</u>	<u>N/A</u>	<input type="checkbox"/>
<u>MICHAEL OULBTB</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>MICHAEL W. PLUMER</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>KATHARINE M ANEBOLILLO</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name TSCC Client Name TRBA SENIOR CITIZENS LEAGUE

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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

H.R. 664 PRESCRIPTION DRUG FAIRNESS  
S. 731 PRESCRIPTION DRUG FAIRNESS FOR SENIORS ACT OF 1999  
S. 1480 PRESCRIPTION DRUG / FEHBP FOR SENIORS

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

HOUSE & SENATE  
WHITE HOUSE

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

Name	Covered Official Position (if applicable)	New
<u>MICHAEL J ZABIKO</u>	<u>N/A</u>	<input type="checkbox"/>
<u>MICHAEL OUBLETTE</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>MICHAEL W PLUMER</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>KATHERINE M ANGELIS</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name TSCC Client Name TRBA SENIOR CITIZENS LEAGUE

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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

- H.R. 48 TAX REFORM
- H.R. 689 SOCIAL SECURITY TAX REFORM
- H.R. 1772 NOTH BABY HEALTH CARE RELIEF ACT
- S. 137 SOCIAL SECURITY TAX REFORM
- S. 286 SENIOR CITIZEN EQUITY ACT
- S. 482 SOCIAL SECURITY TAX REFORM

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

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)	New
MICHAEL J ZABIA	N/A	<input type="checkbox"/>
MICHAEL OUBLETTS	N/A	<input checked="" type="checkbox"/>
MICHAEL W. PLUMER		<input checked="" type="checkbox"/>
KATHOLENE M. ANGELO		<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name TSCC Client Name TREASONER CITIZENS LEAGUE

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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues  
H.R. 1776 AMERICAN HOMEOWNERSHIP AND ECONOMIC OPPT. ACT OF 1999

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

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

Name	Covered Official Position (if applicable)	New
<u>MICHAEL J ZABKA</u>	<u>N/A</u>	<input type="checkbox"/>
<u>MICHAEL OUELLETTE</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>MICHAEL W PUMON</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>KATHARINE M ANGELO</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name TBCL

Client Name TRBA SENIOR CITIZENS LEAGUE

**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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

- S. 390 NOTCH FAIRNESS ACT OF 1999
- S. 1102 SOCIAL SECURITY/ANNUAL COLA
- S. 1247 OPE-E ACT OF 1999
- S. 1895 SSA/MEDICARE IMPROVEMENT ACT

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. SENATE

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

Name	Covered Official Position (if applicable)	New
MICHAEL J ZABKO	N/A	<input type="checkbox"/>
MICHAEL OUBELSTTS	N/A	<input checked="" type="checkbox"/>
MICHAEL W. PLUMER	N/A	<input checked="" type="checkbox"/>
KATHERINE M. ANGIOLLO	N/A	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name TSC Client Name TREASON CITIZENS LEAGUE

**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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues
- H.R. 860 THE WINDFALL ELIMINATION PROVISION BILL
  - H.R. 1091 TICKET TO WORK AND SELF-SUFFICIENCY ACT
  - H.R. 1422 CONSUMER PRICE INDEX FOR ELDERLY CONSUMERS ACT
  - H.R. 1771 NOTCH BABY ACT OF 1999
  - H.R. 3012 SOCIAL SECURITY SOLVENCY
  - S. 86 TICKET TO WORK AND SELF-SUFFICIENCY ACT
  - S. 331 WORK INCENTIVES IMPROVEMENT ACT

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

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

Name	Covered Official Position (if applicable)	New
<u>MICHAEL J ZABKO</u>	<u>N/A</u>	<input type="checkbox"/>
<u>MICHAEL GUBLETT</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>MICHAEL W. PUMOL</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>KATHERINE M ANGIOLILLO</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Registrant Name TSCC Client Name TRBA SENIOR CITIZENS LEAGUE

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, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

- H.R. 120 NOTCH BABY ACT OF 1999
- H.R. 122 NOTCH BABY HEALTH CARE RELIEF ACT
- H.R. 147 SOCIAL SECURITY PRESERVATION ACT
- H.R. 148 NOTCH FAIRNESS ACT OF 1999
- H.R. 219 SOCIAL SECURITY PRESERVATION ACT OF 1999
- H.R. 538 SOCIAL SECURITY NOTCH OF 1999
- H.R. 568 NOTCH FAIRNESS ACT.
- H.R. 742 SOCIAL SECURITY BENEFITS RESTORATION ACT OF 1999

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

HOUSE OF REPRESENTATIVES

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

Name	Covered Official Position (if applicable)	New
<u>MICHAEL J ZABKO</u>	<u>N/A</u>	<input type="checkbox"/>
<u>MICHAEL DUBLETT</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>MICHAEL W PLUMER</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
<u>KATHERINE M ANGIOLILLO</u>	<u>N/A</u>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_