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| **DISCLOSURE OF LOBBYING ACTIVITIES** | | | | | Approved by OMB |
| Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  (See reverse for public burden disclosure.) | | | | | 0348-0046 |
| **1. Type of Federal Action:** | | **2. Status of Federal Action:** | | **3. Report Type:** | | | |
| 1. contract 2. grant | | 1. bid/offer/application 2. initial award | | 1. initial filing 2. material change | | | |
| c. cooperative agreement | | c. post-award | | **For Material Change Only:** | | | |
| d. loan | |  | | year \_\_\_\_\_\_\_\_\_ quarter \_\_\_\_\_\_\_\_\_ | | | |
| 1. loan guarantee 2. loan insurance | |  | | date of last report \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **4. Name and Address of Reporting Entity:** | | | **5. If Reporting Entity in No. 4 is a Sub awardee, Enter Name** | | | | |
| **Prime Sub awardee**  Tier \_\_\_\_\_\_, if known:  **Congressional District**, if known: | | | **and Address of Prime:**  **Congressional District**, if known: | | | | |
| **6. Federal Department/Agency:** | | | **7. Federal Program Name/Description:**  CFDA Number, if applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **8. Federal Action Number,** if known**:** | | | **9. Award Amount,** if known**:**  $ | | | | |
| **10. a. Name and Address of Lobbying Registrant** (if individual, last name, first name, MI): | | | **b. Individuals Performing Services** (including address if different from No. 10a)  (last name, first name, MI): | | | | |
| **11.** 1352 Information . This requested disclosure through this of lobbying activities form is authorized is a material by title representation 31 U.S.C. section of fact  upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure. | | | Title:  Signature:  Print Name:  Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date: | | | | |
| **Federal Use Only:** | | | | | Authorized for Local Reproduction  Standard Form LLL (Rev. 7-97) | | |

**INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES**

This disclosure form shall be completed by the reporting entity, whether sub awardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name ,address, city, State and zip code of the reporting entity .Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient .Identify the tier of the sub awardee, e.g., the first sub awardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Sub awardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).

1. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.