GOVERNMENT OF THE DISTRICT OF COLUMBIA BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY WASHINGTON, D.C. 20001

Ye	ear <u>2013</u>		I ODDIVICE A CEN	WITTI DEDOI	D. W. 4	
☑ (ORIGINAL		(See next page for		KI *	ID#
	AMENDMEN	Т				
Туј	pe of Report	January	•	_	nuary Report, please indic e upcoming calendar year.	•
		$\square_{ m July}$				
1.	(a) Registr	ant's Name Arent Fox	LLP		(b) Daytime Phone Nun	nber (202) 857-6000
	(c) Perman	ent Address	1717 K Street, N (Street Ad		Washington, DC 200 (City, State, Zi	
	(d) Tempor	rary Address (while lobbyi	ng) N/A			
			(Street Ad	-	(City, State, Zi	p Code)
2.	Lobbyist(s)	Working for Registrant: A	attach a Supplemental	Sheet if additi	onal space is needed.	
	(a) Name	Richard Newman, Aren	nt Fox LLP	(b) Name	Eve Corbin, Esq., Are	ent Fox LLP
	Address	1717 K Street, NW	****	Address	1717 K Street, N.W.	
		Washington, DC 2003 (City, State, Zip C			Washington, DC 2003 (City, State, Zip Code)	36
	Daytime Pho	ne Number: (202) 857-617	•	Daytime	Phone Number (202)	828-3432
3.	Person Com	pensating Registrant:				
	(a) Name	Independent Sector		(b) Day	ytime Phone Number	(202) 467-6114
	(c) Address	Street, N.W., (Street Address)			Washington, DC 200 (City, State, Zip Code)	36
	(d) Nature	of Business Non-pr	rofit organization			
4.	Terms of Co	ompensation: (a) Hourly	(Salary)	(b)	Ongoing (Duration of En	mployment)
5.	Identify mat Supplementa	ter(s) by subject and forma al Sheet if additional space	l designation on which is needed.	ch the lobbyist/	registrant expects to lobby	/. Attach a
	Conduit rev	venue bonds	10 FB - HALL P			27 - 30/10/10/1

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^{*} REMINDER - Each new or previously registered Lobbyist must file a Lobbyist Registration Form by January 15th of each year.

Attach a Supplemental Sheet if additional space is needed. Name None to report Date Date ____ Name Date _____ Name _____ Date _____ Date ____ Date _____ 7. Total compensation/receipts paid to the Lobbyist for lobbying during the reported period: \$0.00 (Schedule A) Total of other compensation/receipts for lobbying services and compensation paid to others: \$ (Schedule A-1) Total amount of Loans received by the Lobbyist in connection with lobbying during the reporting period: \$_____ (Schedule A-2) 10. Total receipts (Add Lines 7, 8 and 9) \$0.00 11. Total of expenditures made for purposes of lobbying during the reporting period: (Schedule B) 12. Total of other expenditures related to lobbying activities: (Schedule B-1) 13. Total expenditures (Add Lines 11 and 12)

6. Identify the official and title, if known, in the Executive or Legislative Branch with whom the registrant has had oral or written communication during the reporting period relating to lobbying activities, and the date that communication was made.

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BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE <u>1</u> OF <u>1</u> SCHEDULE A - COMPENSATION/RECEIPTS PAID TO THE LOBBYIST FOR LOBBYING: YEAR: <u>2013</u>

Period Covering:	May 1.	2013	through	June 4, 2013	
I CI IOU COVEI IIIZ.	TATCLA T	4013	univugn	June T. Zerj	

LOBBYIST/EMPLOYEE LOBBYIST'S NAME: ARENT FOX LLP

COMPENSATION	/RECEIPTS PAID FO	R LOBBYIN	IG (AMOUNTS M.	AY BE ROUNDED OF	FF TO WHOLE DOLLARS)	
EMP	LOYER'S NAME, AD	DRESS AND	TELEPHONE NU	J MBER	TOTAL THIS PERIOD (FEES/COMPENSATION)	CUMULATIVE TOTAL (FEES/COMPENSATION)
Independent Sec 1602 L Street, N Washington, DC	.W., Suite 900					,
FEES/RETAINER	COMPENSATION				-	
\$0.00	\$	\$	\$	\$	\$0.00	\$0.00
EMP	LOYER'S NAME, AD	DRESS AND	TELEPHONE NU	j MBER	TOTAL THIS PERIOD (FEES/COMPENSATION)	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION			T		
\$	\$	\$	\$	\$	\$	\$
EMP	LOYER'S NAME, AD	DRESS AND	TELEPHONE NU	JMBER	TOTAL THIS PERIOD (FEES/COMPENSATION)	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$	\$	\$	\$	\$	\$
EMPI	LOYER'S NAME, AD	DRESS AND	TELEPHONE NU	UMBER	TOTAL THIS PERIOD (FEES/COMPENSATION)	CUMULATIVE TOTAL (FEES/COMPENSATION)
FEES/RETAINER	COMPENSATION					
\$	\$	\$	\$	\$	\$	\$
	тота			FOR LOBBYING VARD TO LINE 7)	\$0.00	\$0.00

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE NEXT PAGE FOR INSTRUCTIONS)

BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE __ OF __ SCHEDULE A-1 – LOBBYIST COMPENSATION/RECEIPTS RECEIVED FOR LOBBYIST SERVICES AND COMPENSATION PAID TO OTHERS: YEAR: _2013_

Type of report:	January	$\square_{ m July}$
Period Covering: May 1, 2	013 through _	June 4, 2013
LOBBYIST/EMPLOYEE LOBBYIST'S NAME:	ARENT FO	OX LLP

LOBI	BYIST/EMPLOYEE	LOBBYIST'S	NAME:	ARENT FOX L	<u>LP</u>		•
	TION/RECEIPTS RECEI CTIVITIES RELATIVE				OYEE AND PAID BY T	HE COMPENSATI	NG
	EMPLOYER'S N.				4.11.77	TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
	EMPLOYER'S N	AME, ADDRES	S AND TELEPI	HONE NUMBER		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
	EMPLOYER'S N.	AME, ADDRES	S AND TELEP	HONE NUMBER		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
	EMPLOYER'S N	AME, ADDRES	S AND TELEPI	HONE NUMBER		TOTAL THIS PERIOD	CUMULATIVE TOTAL
OFFICE EXPENSES	ADVERTISING & PUBLICATION EXP	PERSONAL EXPENSES	TRAVEL EXPENSES	COMPENSATION TO OTHER	OTHER EXPENSES		
\$	\$	\$	\$	\$	\$	\$	\$
	TOTAL OTH	IER COMPE			D FOR LOBBYING WARD TO LINE 8)	\$	\$

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET A-1 (SEE NEXT PAGE FOR INSTRUCTIONS)

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BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/EMPLOYEE LOBBYIST'S ACTIVITY REPORT PAGE 1 OF 1 **YEAR:** <u>2013</u>

SCHEDULE A-2 – LOANS RECEIVED BY THE LOBBYIST:

LOBBYIST/EMPLOYEE LOBBYIST'S NAME: _

LOAN

LOAN

□July Type of report:

January

Period Covering: May 1, 2013 through June 4, 2013

ARENT FOX LLP

\$

LOANS RECEIVED IN CONNECTION WITH LOBBYING ACTIVITY TOTAL LOANS THIS **CUMULATIVE LOAN** TOTAL EMPLOYER'S NAME, ADDRESS AND TELEPHONE NUMBER PERIOD

3	>	3) 3	•		
					\$	\$
	EMPLOYER'S NAM	IE, ADDRESS A	ND TELEPHON	NE NUMBER	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN TOTAL
LOAN						
\$	\$	\$	\$	\$	\$	\$
	EMPLOYER'S NAM	IE, ADDRESS AI	ND TELEPHON	NE NUMBER	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN TOTAL
				1		
LOAN		····				
\$	\$	\$	\$	\$	\$	\$
	EMPLOYER'S NAM	IE, ADDRESS AI	ND TELEPHON	NE NUMBER	TOTAL LOANS THIS PERIOD	CUMULATIVE LOAN TOTAL

\$

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE REVERSE SIDE FOR INSTRUCTIONS)

TOTAL LOANS RECEIVED FOR THIE PERIOD

(CARRY TOTAL FORWARD TO LINE 9)

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BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY COMPENSATING REGISTRANT'S ACTIVITY REPORT Page 1 of 1 SCHEDULE B – EXPENDITURES PAID BY COMPENSATING REGISTRANT TO THE LOBBYIST

YEAR: <u>2013</u>

	Type of report:	□January □July		
	Period Covering: <u>May 1,</u>	2013 through June 4, 2013	_	
	COMPENSATING REGISTRANT'S NAME:	ARENT FOX LLP		
PAYMENT	S MADE IN CONNECTION WITH LOBBYING ACTIVITIES			
ACTIVITY FOR ACTIV	EXPENSES INCURRED, OR PAID BY THE COMPENSATING VITIES RELATIVE TO LOBBYING ACTIVITIES IN THE DIST	G REGISTRANT TO THE LOBBYING AT TRICT OF COLUMBIA	ND/OR IN-HOUSE EMP	LOYEE LOBBYIST
DATE	NAME AND ADDRESS OF PAYEE	PURPOSE OF COMPENSATION	TOTAL THIS PERIOD	CUMULATIVE TOTAL
			\$	\$
			\$	\$
	The second secon			Ψ
			\$	\$
			\$	\$
		***	\$	\$
-			\$	\$
			\$	\$
***************************************			Ψ	
			\$	\$
		PENDITURES PAID FOR LOBBYING RRY TOTAL FORWARD TO LINE 11)	\$	\$

☐ IF MORE SPACE IS NEEDED, CHECK BOX AND ATTACH SUPPLEMENTAL SHEET (SEE REVERSE SIDE FOR INSTRUCTIONS)

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BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST/COMPENSATING REGISTRANT'S ACTIVITY REPORT Page 1 of 1 SCHEDULE B-1 - OTHER EXPENDITURES

YEAR: 2013

Type of report: .	January	□July
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Period Covering: May 1, 2013 through June 4, 2013

	COMPENSATING REGISTS	ARENT FOX	LLP	
OTHER AC	TIVITY EXPENSES INCURRED, OR PA FOR ACTIVITIES RELATIVE TO LOB	AID BY THE COMPENSATING REGISTRANT TO T BYING ACTIVITIES IN THE DISTRICT.	THE LOBBYIST AND/OR IN-HOU	SE EMPLOYEE
DATE	NAME OF RECIPIENT	DESCRIPTION OF CONSIDERATION	TYPE OF COMPENSATION PAID (LOANS, CONTRIBUTION, GIFT, HONORARIA, ETC.)	TOTAL PAYMENT
				\$
				\$
				\$
				\$
1-2.0			75	\$
				\$
				\$
				\$
	TOTAL O	THER EXPENDITURES PAID FOR LOBBYING		
		(CARRY TOTAL FORWARD TO LINE 12)	\$	\$
☐ IF MO	RE SPACE IS NEEDED, CHECK BOX	AND ATTACH SUPPLEMENTAL SHEET TO SO	CHEDULE B-1	
☑ IF YOU INDICA	J HAVE NOT PAID, INCURRED, OR A	ARRANGED ANY OTHER ACTIVITY EXPENSE	S DURING THE PERIOD, CHEC	к тне вох то

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BOARD OF ETHICS AND GOVERNMENT ACCOUNTABILITY LOBBYIST ACTIVITY REPORT

SCHEDULE C

YEAR 2013

(See next page for instructions)

DATE	NAME	NATURE OF EMPLOYMENT WIT REGISTRANT
ii .		
this Lobbyist Acti	ant (or, if not an individual, a	y of perjury that the statements contained y knowledge, true, correct, and complete.
ignature of Registregistrant must sign	ant (or, if not an individual, a).	y knowledge, true, correct, and complete.
ignature of Registregistrant must sign	ant (or, if not an individual, a). ed by contract to provide lob gistrant.	y knowledge, true, correct, and complete. an authorized officer or agent* of bying services may not sign on behalf of
ignature of Registregistrant must sign The lobbyist retainne compensating re	ant (or, if not an individual, a). ed by contract to provide lob gistrant.	who whedge, true, correct, and complete. In authorized officer or agent* of bying services may not sign on behalf of day of func 2013.
ignature of Registregistrant must sign The lobbyist retain the compensating resubscribed and sworn	ant (or, if not an individual, a). ed by contract to provide lob gistrant. to before me on this	who whedge, true, correct, and complete. An authorized officer or agent* of bying services may not sign on behalf of day of function 2013. Public Hagner
ignature of Registregistrant must sign The lobbyist retain re compensating re	ant (or, if not an individual, a). ed by contract to provide lob gistrant.	who whedge, true, correct, and complete. An authorized officer or agent* of bying services may not sign on behalf of day of function 2013. Public Hagner