

## LOBBYIST FILING AGREEMENT

RECEIVED

JUL 31 2017

This Agreement, made this 26<sup>th</sup> day of JULY, 2017, by and between Greg Massoni, lobbyist for Adventist HealthCare, Inc., Chevron U.S.A. Inc., Cowen Consulting LLC, and OpenGov, and William J. Colquhoun, Staff Counsel to the Maryland State Ethics Commission (hereinafter "Staff Counsel").

### RECITALS

The State Ethics Commission ("the Commission") is the executive agency of the State of Maryland established by Chapter 513, Acts of 1979 for the purpose of enforcing the Maryland Public Ethics Law (General Provisions Article, Title 5, Annotated Code of Maryland, hereinafter the "Ethics Law") including the provisions of Subtitle 7, the lobbying disclosure program.

Greg Massoni ("the filer"), is an individual whose lobbying activities on behalf of the following employers (the "employers") for the periods indicated required him to register as a lobbyist with the Commission: 1) Adventist HealthCare, Inc. for the period November 1, 2015 to November 20, 2015; 2) Chevron U.S.A. Inc., for the period November 1, 2015 to October 31, 2016, and the period November 1, 2016 to October 31, 2017; 3) Cowen Consulting LLC, for the period January 1, 2016 to October 31, 2016, and the period November 1, 2016 to October 31, 2017; and 4) OpenGov for the period November 1, 2016 to October 31, 2017.

The filer did not timely register as required by § 5-704(d)(1) of the Ethics Law. The filer subsequently registered on June 29 and June 30, 2017 by submitting Lobbying Registration Forms on behalf of the employers.

Additionally, the filer was required to submit Lobbying Activity Reports as follows: 1) Adventist HealthCare, Inc. for the reporting period November 1, 2015 through November 20, 2015; 2) Chevron U.S.A. Inc. for the reporting period November 1, 2015 through April 30, 2016; 3) Chevron U.S.A. Inc. for the reporting period May 1, 2016 through October 31, 2016; 4) Chevron U.S.A. Inc. for the reporting period November 1, 2016 through April 30, 2017; 5) Cowen Consulting LLC for the reporting period January 1, 2016 through April 30, 2016; 6) Cowen Consulting LLC for the reporting period May 1, 2016 through October 31, 2016; 7) Cowen Consulting LLC for the reporting period November 1, 2016 through April 30, 2017; and 8) OpenGov for the reporting period November 1, 2016 through April 30, 2017.

The filer failed to submit in a timely manner Lobbying Activity Reports as required by § 5-705(a)(1) of the Ethics Law. The filer submitted the delinquent Lobbying Activity Reports on July 3 and July 5, 2017.

The filer is voluntarily entering into this Agreement to admit his failure to timely register and file Lobbying Activity Reports on behalf of the employers, and to pay a sum of money in lieu of potential late filing fees and fines that could be assessed pursuant to § 5-405 of the Ethics Law.

**NOW THEREFORE**, in consideration of the submission of the required Lobbying Registration Forms and Lobbying Activity Reports by the filer, and the admissions and agreements herein contained, the filer and Staff Counsel stipulate and agree as follows:

1. The filer did not timely file his Lobbying Registration Forms on behalf of the employers as required by § 5-704(d)(1) of the Ethics Law.
2. The filer reported his delinquency to the Commission on June 29, 2017, and filed the Lobbying Registration Forms (copies of which have been attached hereto and made a part thereof) on June 29 and June 30, 2017.
3. The filer did not submit in a timely manner Lobbying Activity Reports as required by § 5-705(a)(1) of the Ethics Law.
4. The filer submitted the delinquent Lobbying Activity Reports on July 3 and July 5, 2017.
5. The filer understands that failure to comply with the lobbying disclosure provisions of the Ethics Law may subject him to a formal complaint by the Commission and, upon finding of a violation, late fees and the possibility of civil fines.
6. Based on the facts stated in this Agreement, the filer agrees to pay as settlement of the late filing matter, the amount of ONE THOUSAND FIVE HUNDRED and no/100 DOLLARS (\$1,500.00) at the time of the execution of this Agreement in lieu of a potential late fees and in lieu of civil fines for the above admitted late filings (Paragraphs 1 and 3).
7. The Staff Counsel will, upon execution of this Agreement by the filer, recommend that the Commission not institute any proceedings on his failure to timely register and submit Lobbying Activity Reports on behalf of the employers. The filer understands that the Commission is under no obligation to accept this Agreement and may decide to take other action, including issuing a complaint.
8. The filer waives a formal hearing on this matter (if the Agreement is accepted by the Commission) to which he would be entitled if a complaint were issued, and he understands that this Agreement and materials relating to this matter are not subject to the confidentiality provisions of the Ethics law, and will be public information unless otherwise protected.

9. The filer understands that a copy of this Agreement will be mailed to the employers.
10. The filer and the Staff Counsel have entered into this Agreement for the sole purpose of resolving the late submission of registrations and reports and for the payment of late fees and other fines and for no other purpose.

**IN WITNESS WHEREOF**, Greg Massoni and William J. Colquhoun, Staff Counsel to the State Ethics Commission, have hereunto set their hands.

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William J. Colquhoun, Staff Counsel  
State Ethics Commission  
45 Calvert Street, 3<sup>rd</sup> Floor  
Annapolis, MD 21401  
(410) 260-7770

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Greg Massoni  
Lobbyist for  
Adventist HealthCare, Inc.  
Chevron U.S.A. Inc.  
Cowen Consulting LLC  
OpenGov

DISTRICT OF COLUMBIA : ss  
State of Maryland  
County of: \_\_\_\_\_, to wit:

Before me, the undersigned, a Notary Public in and for the DISTRICT OF COLUMBIA State and County aforesaid, personally appeared Greg Massoni, who made oath on this 26<sup>th</sup> day of JULY, 2017 in due form of law that the matters and facts hereinabove set forth are to the best of his knowledge, information, and belief, and are his voluntary act and that he executed this document for the purpose set forth herein.

Notary Public JENNIFER A. FOLEY

My Commission Expires: July 14, 2021

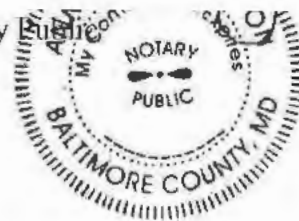


State of Maryland,  
County of: Baltimore, to wit:

Before me, the undersigned, a Notary Public in and for the State and County aforesaid, personally appeared William J. Colquhoun, Staff Counsel to the State Ethics Commission, who made oath on this 31<sup>st</sup> day of July, 2017, in due form of law that he executed this Agreement for the purposes set forth herein.

Notary Public AMY COOPER

My Commission Expires: 12/22/18



Accepted by the Commission

Janet E. McHugh, Chair  
for the Commission

Date: 8/29, 2017

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JUN 30 2011

**MARYLAND STATE ETHICS COMMISSION**  
 45 Calvert Street, 3<sup>rd</sup> Floor  
 Annapolis, MD 21401  
 410-260-7770 / 1-877-669-6085  
<http://ethics.maryland.gov>

STATE ETHICS COMMISSION

**LOBBYING REGISTRATION FORM (Form 3)**

**PART A. GENERAL INFORMATION**

Type of Registration: (Check all appropriate blanks)

Legislative Action Lobbyist \_\_\_\_\_

Executive Action Lobbyist  \_\_\_\_\_

Grass Roots Lobbyist \_\_\_\_\_

Non-Exempt Employer \_\_\_\_\_

Primary Purpose of Organization:

Is the employer or the registrant (if there is no employer) organized and operated for the primary purpose of attempting to influence any legislative or executive action? Yes \_\_\_\_\_ No

Enclose a check made payable to the State of Maryland for \$100.

CHECK NO. 200092834

**PART B. IDENTIFICATION OF REGISTRANT AND EMPLOYER**

1. Identifying Information:

a) Name: Greg Massoni

b) Permanent Address: (Include firm name if applicable) King & Spalding LLP  
1700 Pennsylvania Avenue, NW, Suite 200, Washington, DC 20006

c) Business Telephone: (202 ) 737-0500 Do you want number on published lobbyist list? Yes  No \_\_\_\_\_  
Cell Phone: (optional) (443) 223-1025

d) E-mail Address: (required) gmassoni@kslaw.com

2. Identification of Others Required to Register:

a) Will any person be required to register as a lobbyist on behalf of the person or organization identified in Part B.1(a)? Yes \_\_\_\_\_ No

b) If the answer to a) is "Yes," identify each such person below and provide his/her name and address:  
\_\_\_\_\_  
\_\_\_\_\_

3. Identification of Employer:

a) Identify the person or organization that compensates the registrant for activities requiring this registration:  
Name: Adventist HealthCare, Inc.

Permanent Address: 820 W. Diamond Avenue, Suite 600, Gaithersburg, MD 20878

Business Telephone: (301 ) 315-3425

Nature of Business: Health care provider

b) If, in the course of representing the employer identified in Part B.3(a), the registrant will also be representing other entities for which the registrant is not required to file separate registrations, identify those entities here (if none, indicate "none").

none

4. Registration Information:

- a) State the period (include both beginning and ending month, day and year) for which this registration is effective: November 1, 2015 to November 20, 2015
- b) Identify the matters on which the registrant expects to act or employ someone to act during the registration period: Health Care; Other - Certificate of Need (CON)

**PART C. REGISTRANT'S CERTIFICATION**

1. Certification of Training Compliance:

I hereby certify by checking one of the two options below that I am in compliance with the mandatory training requirements of §5-704.1 of the Public Ethics Law:

- I am current in my training status. Date of most recent training: August 1, 2015
- I have not yet been a regulated lobbyist for 6 months but will complete training prior to that time, or if my initial registration is for a period less than 6 months, I will complete training before any subsequent registration.

2. Certification of Authorization to Lobby:

I am authorized to act on behalf of the employer/entity identified in Part B.3(a) (and Part B.3(b), if any) for the period set forth in Part B.4(a) and as to the matters set forth in Part B.4(b) herein unless this authority is terminated sooner. This authorization has been granted to me by (identity of official granting authorization):

Name and Title: Jonathan Sachs, Director of Public Policy and Community Engagement  
 Address: 820 W. Diamond Ave, Suite 600, Gaithersburg, MD 20878  
 Telephone: (301) 315-3425 E-mail: jsachs2@adventisthealthcare.com

**PART D. EXEMPTION STATUS OF EMPLOYER**

An employer who compensates one or more regulated lobbyists is required to separately register as a lobbyist, UNLESS all expenditures requiring registration will be filed by one or more of the regulated lobbyists compensated by the employer. Please indicate status below (ONLY CHECK ONE).

- a)  The employer does claim an exemption from filing its own registration and activity reports because all expenditures requiring registration and reporting will be reported by the above or another registrant acting on its behalf, and the employer engages in no other lobbying activity that requires it to register and report.
- b)  The employer does not claim an exemption from filing its own registration and activity reports. The above registrant will report only expenditures and compensation regarding the above registrant's activity. A separate registration will be submitted by the employer listed in Part B.3.

I hereby make oath or affirm under the penalties of perjury that the contents of this registration are complete, true and correct to the best of my knowledge, information and belief and that I am authorized to engage in lobbying for the employer set forth in Part B.3. above.

[SEAL] Signature of Regulated Lobbyist: \_\_\_\_\_  
 Date: 6-27-17  
 Sworn to before me this 22nd day of June, 2017

Signature of Notary Public: \_\_\_\_\_  
 Printed/typed Name of Notary Public: MARY E. DANN  
 My Commission Expires: \_\_\_\_\_



**MARY E. DANN**  
 NOTARY PUBLIC DISTRICT OF COLUMBIA  
 My Commission Expires May 14, 2021



## MARYLAND STATE ETHICS COMMISSION

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

### GENERAL LOBBYING ACTIVITY FORM (Form #4)

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: November 01, 2015 through November 20, 2015

Termination Report: Yes \_\_\_\_\_ No

Termination Date:

#### PART A Identification of Regulated Lobbyist (Registration and Employer)

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

**a)** Name: Greg Massoni

**b)** Permanent Address (Include firm name if applicable):

Firm Name: King & Spalding

Address:

1700 Pennsylvania Ave, NW

Suite 200

Washington, DC 20006

**c)** Business telephone: 202-737-0500

Cell phone: 443-223-1025

**A. 2)** Identification of others required to register:

**a)** Was any other person required to register as a lobbyist on behalf of the filer?

Yes \_\_\_\_\_ No

**b)** If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

**a)** Did you engage in lobbying activity on behalf of a person or entity other than yourself?

Yes  No \_\_\_\_\_

Name: Adventist HealthCare, Inc

Permanent Address:

820 W. Diamond Ave

Suite 600

Gaithersburg, MD 20878

Business Telephone: 301-315-3425

Nature of business: Health care provider

Website of employer:

**b)** Did you represent any other person or entity with regard to the matters covered by this registration?

Yes \_\_\_\_\_ No

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?

Yes \_\_\_\_\_ No

**A. 5)** Registration Information:

**a)** For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?

November 01, 2015 to November 20, 2015

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

Other - Healthcare - certificate of need

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes \_\_\_\_\_ No  X

If the exemption claimed differs from the registration form, please explain in writing:

## PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes \_\_\_\_\_ No  X

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes \_\_\_\_\_ No  X

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes \_\_\_\_\_ No  X

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes \_\_\_\_\_ No  X

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes \_\_\_\_\_ No  X

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes \_\_\_\_\_ No  X

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$5,000.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes \_\_\_\_\_ No  X



<b>B. 8)</b>	What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer?	B-8	<u>\$0.00</u>
<b>B. 9)</b>	Did you incur any additional office expenses not reported in B-7 or B-8? Yes _____ No <u>X</u>		
	If yes, list the amount:	B-9	<u>\$0.00</u>
<b>B. 10)</b>	Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8? Yes _____ No <u>X</u>		
	If yes, list the amount:	B-10	<u>\$0.00</u>
<b>B. 11)</b>	Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees? Yes _____ No <u>X</u>		
	If yes, list the amount:	B-11	<u>\$0.00</u>
<b>B. 12)</b>	Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer? Yes _____ No <u>X</u>		
	If yes, list the name and amount for each.		
		Total B-12 Expenses	<u>\$0.00</u>
<b>B. 13)</b>	Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation. Yes _____ No <u>X</u>		
	If yes, list the amount:	B-13	<u>\$0.00</u>
	Please provide an explanation: <u>N/A</u>		
			<b>TOTAL <u>\$5,000.00</u></b>

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No X
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No X
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No X
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

### PART G Signature and Oath

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

X I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/05/2017

RECEIVED

JUN 30 2007

STATE ETHICS COMMISSION

MARYLAND STATE ETHICS COMMISSION  
45 Calvert Street, 3<sup>rd</sup> Floor  
Annapolis, MD 21401  
410-260-7770 / 1-877-669-6085  
<http://ethics.maryland.gov>

### LOBBYING REGISTRATION FORM (Form 3)

#### PART A. GENERAL INFORMATION

Type of Registration: (Check all appropriate blanks)

Legislative Action Lobbyist \_\_\_\_\_

Executive Action Lobbyist  \_\_\_\_\_

Grass Roots Lobbyist \_\_\_\_\_

Non-Exempt Employer \_\_\_\_\_

Primary Purpose of Organization:

Is the employer or the registrant (if there is no employer) organized and operated for the primary purpose of attempting to influence any legislative or executive action? Yes \_\_\_\_\_ No  \_\_\_\_\_

Enclose a check made payable to the State of Maryland for \$100.

CHECK NO. 2000 91334

#### PART B. IDENTIFICATION OF REGISTRANT AND EMPLOYER

1. Identifying Information:

a) Name: Greg Massoni

b) Permanent Address: (Include firm name if applicable) King & Spalding LLP  
1700 Pennsylvania Avenue, NW, Suite 200, Washington, DC 20006

c) Business Telephone: (202 ) 737-0500 Do you want number on published lobbyist list? Yes  No \_\_\_\_\_  
Cell Phone: (optional) (443) 223-1025

d) E-mail Address: (required) gmassoni@kslaw.com

2. Identification of Others Required to Register:

a) Will any person be required to register as a lobbyist on behalf of the person or organization identified in Part B.1(a)? Yes \_\_\_\_\_ No  \_\_\_\_\_

b) If the answer to a) is "Yes," identify each such person below and provide his/her name and address:  
\_\_\_\_\_  
\_\_\_\_\_

3. Identification of Employer:

a) Identify the person or organization that compensates the registrant for activities requiring this registration:

Name: Chevron U.S.A. Inc.

Permanent Address: 6001 Bollinger Canyon Road, San Ramon, CA 94583

Business Telephone: (925 ) 842-1000

Nature of Business: Energy

b) If, in the course of representing the employer identified in Part B.3(a), the registrant will also be representing other entities for which the registrant is not required to file separate registrations, identify those entities here (if none, indicate "none").  
none

4. Registration Information:

- a) State the period (include both beginning and ending month, day and year) for which this registration is effective: November 1, 2015 to October 31, 2016
- b) Identify the matters on which the registrant expects to act or employ someone to act during the registration period: Energy matters

**PART C. REGISTRANT'S CERTIFICATION**

1. Certification of Training Compliance:

I hereby certify by checking one of the two options below that I am in compliance with the mandatory training requirements of §5-704.1 of the Public Ethics Law:

- I am current in my training status. Date of most recent training: August 1, 2015
- I have not yet been a regulated lobbyist for 6 months but will complete training prior to that time, or if my initial registration is for a period less than 6 months, I will complete training before any subsequent registration.

2. Certification of Authorization to Lobby:

I am authorized to act on behalf of the employer/entity identified in Part B.3(a) (and Part B.3(b), if any) for the period set forth in Part B.4(a) and as to the matters set forth in Part B.4(b) herein unless this authority is terminated sooner. This authorization has been granted to me by (identity of official granting authorization):

Name and Title: John A. DePasquale, Senior Counsel  
 Address: 6001 Bollinger Canyon Road, San Ramon, CA 94583  
 Telephone: (925) 842-1000 E-mail: JDPS@chevron.com

**PART D. EXEMPTION STATUS OF EMPLOYER**

An employer who compensates one or more regulated lobbyists is required to separately register as a lobbyist, **UNLESS all** expenditures requiring registration will be filed by one or more of the regulated lobbyists compensated by the employer. Please indicate status below (ONLY CHECK ONE).

- a)  The employer does claim an exemption from filing its own registration and activity reports because all expenditures requiring registration and reporting will be reported by the above or another registrant acting on its behalf, and the employer engages in no other lobbying activity that requires it to register and report.
- b)  The employer does not claim an exemption from filing its own registration and activity reports. The above registrant will report only expenditures and compensation regarding the above registrant's activity. A separate registration will be submitted by the employer listed in Part B.3.

I hereby make oath or affirm under the penalties of perjury that the contents of this registration are complete, true and correct to the best of my knowledge, information and belief and that I am authorized to engage in lobbying for the employer set forth in Part B.3. above.

[SEAL] Signature of Regulated Lobbyist: \_\_\_\_\_  
 Date: 6/2/17  
 Sworn to before me this 22<sup>nd</sup> day of June, 2017

Signature of Notary Public: \_\_\_\_\_  
 Printed/typed Name of Notary Public: MARY E. DANN



**MARY E. DANN**  
 NOTARY PUBLIC DISTRICT OF COLUMBIA  
 My Commission Expires May 14, 2021

**MARYLAND STATE ETHICS COMMISSION**

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

**GENERAL LOBBYING ACTIVITY FORM (Form #4)**

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: November 01, 2015 through April 30, 2016

Termination Report: Yes \_\_\_\_\_ No  x

Termination Date:

**PART A Identification of Regulated Lobbyist (Registration and Employer)**

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

**a)** Name: Greg Massoni

**b)** Permanent Address (Include firm name if applicable):

Firm Name: King & Spalding

Address:

1700 Pennsylvania Ave, NW

Suite 200

Washington, DC 20006

**c)** Business telephone: 202-737-0500

Cell phone: 443-223-1025

**A. 2)** Identification of others required to register:

**a)** Was any other person required to register as a lobbyist on behalf of the filer?

Yes \_\_\_\_\_ No  x

**b)** If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

**a)** Did you engage in lobbying activity on behalf of a person or entity other than yourself?

Yes  x  No \_\_\_\_\_

Name: Chevron U.S.A. Inc.

Permanent Address:

6001 Bollinger Canyon Road

San Ramon, CA 94583

Business Telephone: 925-842-1000

Nature of business: Energy

Website of employer:

**b)** Did you represent any other person or entity with regard to the matters covered by this registration?

Yes \_\_\_\_\_ No  x

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?

Yes \_\_\_\_\_ No  x

**A. 5)** Registration Information:

**a)** For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?

November 01, 2015 to October 31, 2016

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

Other - Energy matters

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

## PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$37,500.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes  No

<b>B. 8)</b>	What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer?	B-8	<u>\$0.00</u>
<b>B. 9)</b>	Did you incur any additional office expenses not reported in B-7 or B-8? Yes _____ No <u>x</u> If yes, list the amount:	B-9	<u>\$0.00</u>
<b>B. 10)</b>	Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8? Yes _____ No <u>x</u> If yes, list the amount:	B-10	<u>\$0.00</u>
<b>B. 11)</b>	Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees? Yes _____ No <u>x</u> If yes, list the amount:	B-11	<u>\$0.00</u>
<b>B. 12)</b>	Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer? Yes _____ No <u>x</u> If yes, list the name and amount for each.		
		Total B-12 Expenses	<u>\$0.00</u>
<b>B. 13)</b>	Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation. Yes _____ No <u>x</u> If yes, list the amount: Please provide an explanation: <u>N/A</u>	B-13	<u>\$0.00</u>
		<b>TOTAL</b>	<u>\$37,500.00</u>

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No x
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No x
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No x
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No x

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

**PART G Signature and Oath**

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

x I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/05/2017

## MARYLAND STATE ETHICS COMMISSION

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

### GENERAL LOBBYING ACTIVITY FORM (Form #4)

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: May 01, 2016 through October 31, 2016

Termination Report: Yes \_\_\_\_\_ No   x  

Termination Date:

#### PART A Identification of Regulated Lobbyist (Registration and Employer)

- A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)
- a)** Name: Greg Massoni
- b)** Permanent Address (Include firm name if applicable):  
Firm Name: King & Spalding
- Address:  
1700 Pennsylvania Ave. NW  
Suite 200  
Washington, DC 20006
- c)** Business telephone: 202-737-0500
- Cell phone: 443-223-1025
- A. 2)** Identification of others required to register:
- a)** Was any other person required to register as a lobbyist on behalf of the filer?  
Yes \_\_\_\_\_ No   x
- b)** If the answer to a) is "Yes", identify each such person below and give their name and address:
- A. 3)** Identification of employer (complete only if registrant acts on behalf of another):
- a)** Did you engage in lobbying activity on behalf of a person or entity other than yourself?  
Yes   x   No \_\_\_\_\_
- Name: Chevron U.S.A. Inc.
- Permanent Address:  
6001 Bollinger Canyon Road  
San Ramon, CA 94583
- Business Telephone: 925-842-1000
- Nature of business: Energy
- Website of employer:
- b)** Did you represent any other person or entity with regard to the matters covered by this registration?  
Yes \_\_\_\_\_ No   x
- A. 4)** Primary purpose of the organization:  
Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?  
Yes \_\_\_\_\_ No   x
- A. 5)** Registration Information:
- a)** For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?  
November 01, 2015 to October 31, 2016



b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

Other - Energy matters

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

## PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$15,000.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes  No

- B. 8)** What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer? B-8 \$0.00
- B. 9)** Did you incur any additional office expenses not reported in B-7 or B-8?  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-9 \$0.00
- B. 10)** Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8?  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-10 \$0.00
- B. 11)** Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees?  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-11 \$0.00
- B. 12)** Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer?  
Yes \_\_\_\_\_ No X  
If yes, list the name and amount for each.  
  
Total B-12 Expenses \$0.00
- B. 13)** Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation.  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-13 \$0.00  
Please provide an explanation:  
N/A
- TOTAL \$15,000.00**

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No X
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No X
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No X
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

### PART G Signature and Oath

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- I. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- II. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

X I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/05/2017

**PART A. GENERAL INFORMATION**

What Type of registration are you seeking?

Legislative Action Lobbyist \_\_\_\_\_ Grass Roots Lobbyist \_\_\_\_\_  
Executive Action Lobbyist   x   Non-exempt employer \_\_\_\_\_

Primary purpose of Organization

Is the employer or registrant (if there is no employer) organized and operated for the primary purpose of attempting to influence any legislation or executive action?  
Yes \_\_\_\_\_ No   x  

Credit Card Authorization #:   17084644  

**PART B. IDENTIFICATION OF REGISTRANT/REGULATED LOBBYIST**

**1. Identifying Information**

- a) Name of Registrant/Regulated Lobbyist: Greg Massoni
- b) Firm Name: King & Spalding

Permanent Address:  
1700 Pennsylvania Ave. NW  
Suite 200  
Washington, DC 20006

- c) Business telephone: 202-737-0500

Cell phone: 443-223-1025

Do you want your telephone number on the published lobbyist list?  
Yes   x   No \_\_\_\_\_

**2. Identification Of Others Required To Register**

- a) Will any other person be required to register as a lobbyist on behalf of the person or the organization identified in Part B1 (a)?  
Yes \_\_\_\_\_ No   x
- b) If the answer to a) is "Yes", identify each such person below and provide his/her name and address?

**3. Identification Of Employer**

- a) Name of persons or organizations that compensates the registrant for activities requiring this registration.  
Chevron U.S.A. Inc.

Permanent Address:  
6001 Bollinger Canyon Road  
San Ramon, CA 94583

Business Telephone: 925-842-1000

Nature of business: Energy

- b) If, in the course of representing the employer identified in Part B.3(a), will you also be representing other entities for which the registrant is not required to file separate registrations?  
Yes \_\_\_\_\_ No   x

**4. Registration Information**

- a) State the period (include both beginning and ending month, day, and year) for which this registration is effective:  
November 01, 2016 to October 31, 2017
- b) Identify the matters on which the registrant expects to act or employ someone to act during the registration period:  
ENERGY MATTERS

**PART C. REGISTRANT'S CERTIFICATION**

**1. Certification of Training Compliance:**

I hereby certify by checking one of the two options below that I am in compliance with the mandatory training requirements of §5-704.1 of the Public Ethics Law:

I am current in my training status. Date of most recent training: August 01, 2015

I have not yet been a regulated lobbyist for 6 months but will complete training prior to that time, or if my initial registration is for a period less than 6 months, I will complete training before any subsequent registration.

**2. Certification of Authorization to Lobby:**

I am authorized to act on behalf of the employer/entity identified in Part B.3(a) (and Part B.3(b), if any) for the period set forth in Part B.4(a) and as to the matters set forth in Part B.4(b) herein unless this authority is terminated sooner. This authorization has been granted to me by (identity of official granting authorization):

Name and Title: John A. DePasquale, Senior Counsel  
Address: 6001 Bollinger Canyon Road, San Ramon, CA 94583  
Telephone: 9258421000 E-mail: JDPS@chevron.com

**PART D. EXEMPTION STATUS OF EMPLOYER**

**An employer who compensates one or more regulated lobbyists is required to separately register as a lobbyist, UNLESS all expenditures requiring registration will be filed by one or more of the regulated lobbyists compensated by the employer. Please indicate status below (ONLY CHECK ONE)**

- a)  The employer claims the exemption from filing its own registration and activity reports because all expenditures requiring registration and reporting will be reported by this registrant.
- b)  The employer does not claim an exemption from filing its own registration and activity report because the registrant will report only expenditures and compensation regard the filer's activity. If this option is selected, the employer must submit a separate registration for lobbying and the required reports.

I hereby make oath or affirm under the penalties of perjury that the contents of this registration are complete, true and correct to the best of my knowledge, information and belief and that I am authorized to engage in lobbying for the employer set forth above in Part B.3.

**MARYLAND STATE ETHICS COMMISSION**

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

**GENERAL LOBBYING ACTIVITY FORM (Form #4)**

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: November 01, 2016 through April 30, 2017

\*This Activity Report was completed by Claudia A. Hrvatin on behalf of Greg Massoni

Termination Report: Yes \_\_\_\_\_ No  x

Termination Date:

**PART A Identification of Regulated Lobbyist (Registration and Employer)**

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

a) Name: Greg Massoni

b) Permanent Address (Include firm name if applicable):  
Firm Name: King & Spalding

Address:  
1700 Pennsylvania Ave. NW  
Suite 200  
Washington, DC 20006

c) Business telephone: 202-737-0500

Cell phone: 443-223-1025

**A. 2)** Identification of others required to register:

a) Was any other person required to register as a lobbyist on behalf of the filer?  
Yes \_\_\_\_\_ No  x

b) If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

a) Did you engage in lobbying activity on behalf of a person or entity other than yourself?  
Yes  x  No \_\_\_\_\_

Name: Chevron U.S.A. Inc.

Permanent Address:  
6001 Bollinger Canyon Road  
San Ramon, CA 94583

Business Telephone: 925-842-1000

Nature of business: Energy

Website of employer:

b) Did you represent any other person or entity with regard to the matters covered by this registration?  
Yes \_\_\_\_\_ No  x

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?  
Yes \_\_\_\_\_ No  x

**A. 5)** Registration Information:

a) For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?  
November 01, 2016 to October 31, 2017

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

ENERGY MATTERS

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

### PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$12,500.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes  No

- B. 8)** What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer? B-8 \$0.00
- B. 9)** Did you incur any additional office expenses not reported in B-7 or B-8? Yes \_\_\_\_\_ No X  
If yes, list the amount: B-9 \$0.00
- B. 10)** Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8? Yes \_\_\_\_\_ No X  
If yes, list the amount: B-10 \$0.00
- B. 11)** Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees? Yes \_\_\_\_\_ No X  
If yes, list the amount: B-11 \$0.00
- B. 12)** Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer? Yes \_\_\_\_\_ No X  
If yes, list the name and amount for each. Total B-12 Expenses \$0.00
- B. 13)** Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation. Yes \_\_\_\_\_ No X  
If yes, list the amount: B-13 \$0.00  
Please provide an explanation: N/A
- TOTAL \$12,500.00**

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c)) Yes \_\_\_\_\_ No X
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705) Yes \_\_\_\_\_ No X
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706) Yes \_\_\_\_\_ No X
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices? Yes \_\_\_\_\_ No X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

**PART G Signature and Oath**

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

X I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/03/2017



RECEIVED

MARYLAND STATE ETHICS COMMISSION  
45 Calvert Street, 3<sup>rd</sup> Floor  
Annapolis, MD 21401  
410-260-7770 / 1-877-669-6085  
<http://ethics.maryland.gov>

JUN 30 2017

STATE ETHICS COMMISSION

### LOBBYING REGISTRATION FORM (Form 3)

#### PART A. GENERAL INFORMATION

Type of Registration: (Check all appropriate blanks)

Legislative Action Lobbyist

Executive Action Lobbyist

Grass Roots Lobbyist

Non-Exempt Employer

Primary Purpose of Organization:

Is the employer or the registrant (if there is no employer) organized and operated for the primary purpose of attempting to influence any legislative or executive action? Yes  No

Enclose a check made payable to the State of Maryland for \$100.

CHECK NO. 2000 92834

#### PART B. IDENTIFICATION OF REGISTRANT AND EMPLOYER

1. Identifying Information:

a) Name: Greg Massoni

b) Permanent Address: (Include firm name if applicable) King & Spalding LLP  
1700 Pennsylvania Avenue, NW, Suite 200, Washington, DC 20006

c) Business Telephone: (202 ) 737-0500 Do you want number on published lobbyist list? Yes  No   
Cell Phone: (optional) (443) 223-1025

d) E-mail Address: (required) gmassoni@kslaw.com

2. Identification of Others Required to Register:

a) Will any person be required to register as a lobbyist on behalf of the person or organization identified in Part B.1(a)? Yes  No

b) If the answer to a) is "Yes," identify each such person below and provide his/her name and address:  
\_\_\_\_\_  
\_\_\_\_\_

3. Identification of Employer:

a) Identify the person or organization that compensates the registrant for activities requiring this registration:  
Name: Cowen Consulting LLC  
Permanent Address: 14 Rock Falls Ct., Rockville, MD 20854

Business Telephone: (202 ) 285-7777  
Nature of Business: Consulting

b) If, in the course of representing the employer identified in Part B.3(a), the registrant will also be representing other entities for which the registrant is not required to file separate registrations, identify those entities here (if none, indicate "none").  
Hudson Group Retail LLC

4. Registration Information:

- a) State the period (include both beginning and ending month, day and year) for which this registration is effective: January 1, 2016 to October 31, 2016
- b) Identify the matters on which the registrant expects to act or employ someone to act during the registration period: Airports, Economic Development

**PART C. REGISTRANT'S CERTIFICATION**

1. Certification of Training Compliance:

I hereby certify by checking one of the two options below that I am in compliance with the mandatory training requirements of §5-704.1 of the Public Ethics Law:

- I am current in my training status. Date of most recent training: August 1, 2015
- I have not yet been a regulated lobbyist for 6 months but will complete training prior to that time, or if my initial registration is for a period less than 6 months, I will complete training before any subsequent registration.

2. Certification of Authorization to Lobby:

I am authorized to act on behalf of the employer/entity identified in Part B.3(a) (and Part B.3(b), if any) for the period set forth in Part B.4(a) and as to the matters set forth in Part B.4(b) herein unless this authority is terminated sooner. This authorization has been granted to me by (identity of official granting authorization):

Name and Title: Lee Cowen, Principal  
 Address: 14 Rock Falls Ct., Rockville, MD 20854  
 Telephone: (202) 285-7777 E-mail: lee@cowenllc.com

**PART D. EXEMPTION STATUS OF EMPLOYER**

An employer who compensates one or more regulated lobbyists is required to separately register as a lobbyist, **UNLESS all** expenditures requiring registration will be filed by one or more of the regulated lobbyists compensated by the employer. Please indicate status below (ONLY CHECK ONE).

- a)  The employer does claim an exemption from filing its own registration and activity reports because all expenditures requiring registration and reporting will be reported by the above or another registrant acting on its behalf, and the employer engages in no other lobbying activity that requires it to register and report.
- b)  The employer does not claim an exemption from filing its own registration and activity reports. The above registrant will report only expenditures and compensation regarding the above registrant's activity. A separate registration will be submitted by the employer listed in Part B.3.

I hereby make oath or affirm under the penalties of perjury that the contents of this registration are complete, true and correct to the best of my knowledge, information and belief and that I am authorized to engage in lobbying for the employer set forth in Part B.3. above.

[SEAL] Signature of Regulated Lobbyist: \_\_\_\_\_  
 Date: 6/22/17  
 Sworn to before me this 22nd day of June, 2017

Signature of Notary Public: \_\_\_\_\_  
 Printed/typed Name of Notary Public: MARY E. DANN



**MARY E. DANN**  
 NOTARY PUBLIC DISTRICT OF COLUMBIA  
 My Commission Expires May 14, 2021

**MARYLAND STATE ETHICS COMMISSION**

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

**GENERAL LOBBYING ACTIVITY FORM (Form #4)**

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: January 01, 2016 through April 30, 2016

Termination Report: Yes \_\_\_\_\_ No  x

Termination Date:

**PART A Identification of Regulated Lobbyist (Registration and Employer)**

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

**a)** Name: Greg Massoni

**b)** Permanent Address (Include firm name if applicable):

Firm Name: King & Spalding

Address:

1700 Pennsylvania Ave, NW

Suite 200

Washington, DC 20006

**c)** Business telephone: 202-737-0500

Cell phone: 443-223-1025

**A. 2)** Identification of others required to register:

**a)** Was any other person required to register as a lobbyist on behalf of the filer?

Yes \_\_\_\_\_ No  x

**b)** If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

**a)** Did you engage in lobbying activity on behalf of a person or entity other than yourself?

Yes  x  No \_\_\_\_\_

Name: Cowen Consulting LLC

Permanent Address:

14 Rock Falls Ct

Rockville, MD 20854

Business Telephone: 202-285-7777

Nature of business: Consulting

Website of employer:

**b)** Did you represent any other person or entity with regard to the matters covered by this registration?

Yes \_\_\_\_\_ No  x

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?

Yes \_\_\_\_\_ No  x

**A. 5)** Registration Information:

**a)** For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?

January 01, 2016 to October 31, 2016

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

Other - Airports, Economic Development

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

## PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$10,000.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes  No

- B. 8)** What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer? B-8 \$0.00
- B. 9)** Did you incur any additional office expenses not reported in B-7 or B-8?  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-9 \$0.00
- B. 10)** Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8?  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-10 \$0.00
- B. 11)** Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees?  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-11 \$0.00
- B. 12)** Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer?  
Yes \_\_\_\_\_ No X  
If yes, list the name and amount for each.  
Total B-12 Expenses \$0.00
- B. 13)** Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation.  
Yes \_\_\_\_\_ No X  
If yes, list the amount: B-13 \$0.00  
Please provide an explanation:  
N/A  
**TOTAL \$10,000.00**

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No X
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No X
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No X
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

### PART G Signature and Oath

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

X I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/05/2017

## MARYLAND STATE ETHICS COMMISSION

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

### GENERAL LOBBYING ACTIVITY FORM (Form #4)

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: May 01, 2016 through October 31, 2016

Termination Report: Yes \_\_\_\_\_ No  x

Termination Date:

#### PART A Identification of Regulated Lobbyist (Registration and Employer)

- A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)
- a) Name: Greg Massoni
- b) Permanent Address (Include firm name if applicable):  
Firm Name: King & Spalding
- Address:  
1700 Pennsylvania Ave. NW  
Suite 200  
Washington, DC 20006
- c) Business telephone: 202-737-0500
- Cell phone: 443-223-1025
- A. 2)** Identification of others required to register:
- a) Was any other person required to register as a lobbyist on behalf of the filer?  
Yes \_\_\_\_\_ No  x
- b) If the answer to a) is "Yes", identify each such person below and give their name and address:
- A. 3)** Identification of employer (complete only if registrant acts on behalf of another):
- a) Did you engage in lobbying activity on behalf of a person or entity other than yourself?  
Yes  x  No \_\_\_\_\_
- Name: Cowen Consulting LLC
- Permanent Address:  
14 Rock Falls Ct  
Rockville, MD 20854
- Business Telephone: 202-285-7777
- Nature of business: Consulting
- Website of employer:
- b) Did you represent any other person or entity with regard to the matters covered by this registration?  
Yes \_\_\_\_\_ No  x
- A. 4)** Primary purpose of the organization:  
Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?  
Yes \_\_\_\_\_ No  x
- A. 5)** Registration Information:
- a) For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?  
January 01, 2016 to October 31, 2016

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

Other - Airports, Economic Development

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

## PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$15,000.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes  No



<b>B. 8)</b>	What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer?	B-8	<u>\$0.00</u>
<b>B. 9)</b>	Did you incur any additional office expenses not reported in B-7 or B-8? Yes _____ No <u>x</u> If yes, list the amount:	B-9	<u>\$0.00</u>
<b>B. 10)</b>	Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8? Yes _____ No <u>x</u> If yes, list the amount:	B-10	<u>\$0.00</u>
<b>B. 11)</b>	Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees? Yes _____ No <u>x</u> If yes, list the amount:	B-11	<u>\$0.00</u>
<b>B. 12)</b>	Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer? Yes _____ No <u>x</u> If yes, list the name and amount for each.		
		Total B-12 Expenses	<u>\$0.00</u>
<b>B. 13)</b>	Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation. Yes _____ No <u>x</u> If yes, list the amount: Please provide an explanation: <u>N/A</u>	B-13	<u>\$0.00</u>
			<b>TOTAL</b> <u>\$15,000.00</u>

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No x
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No x
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No x
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No x

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

### PART G Signature and Oath

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

x I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/05/2017

## PART A. GENERAL INFORMATION

What Type of registration are you seeking?

Legislative Action Lobbyist

Grass Roots Lobbyist \_\_\_\_\_

Executive Action Lobbyist

Non-exempt employer \_\_\_\_\_

Primary purpose of Organization

Is the employer or registrant (if there is no employer) organized and operated for the primary purpose of attempting to influence any legislation or executive action?

Yes \_\_\_\_\_ No

Credit Card Authorization #: 17084644

## PART B. IDENTIFICATION OF REGISTRANT/REGULATED LOBBYIST

### 1. Identifying Information

a) Name of Registrant/Regulated Lobbyist: Greg Massoni

b) Firm Name: King & Spalding

Permanent Address:  
1700 Pennsylvania Ave, NW  
Suite 200  
Washington, DC 20006

c) Business telephone: 202-737-0500

Cell phone: 443-223-1025

Do you want your telephone number on the published lobbyist list?

Yes  No \_\_\_\_\_

### 2. Identification Of Others Required To Register

a) Will any other person be required to register as a lobbyist on behalf of the person or the organization identified in Part B1 (a)?

Yes \_\_\_\_\_ No

b) If the answer to a) is "Yes", identify each such person below and provide his/her name and address?

### 3. Identification Of Employer

a) Name of persons or organizations that compensates the registrant for activities requiring this registration.

Cowen Consulting LLC

Permanent Address:  
14 Rock Falls Ct  
Rockville, MD 20854

Business Telephone: 202-285-7777

Nature of business: Consulting

b) If, in the course of representing the employer identified in Part B.3(a), will you also be representing other entities for which the registrant is not required to file separate registrations?

Yes  No \_\_\_\_\_

Name: Hudson Group Retail LLC

Permanent Address:  
8006 Ellingson Drive  
Chevy Chase, MD 20815  
Telephone: 202-365-1983

### 4. Registration Information

a) State the period (include both beginning and ending month, day, and year) for which this registration is effective:

November 01, 2016 to October 31, 2017

- b) Identify the matters on which the registrant expects to act or employ someone to act during the registration period:

AIRPORTS  
ECONOMIC DEVELOPMENT

### PART C. REGISTRANT'S CERTIFICATION

#### 1. Certification of Training Compliance:

I hereby certify by checking one of the two options below that I am in compliance with the mandatory training requirements of §5-704.1 of the Public Ethics Law:

I am current in my training status. Date of most recent training: August 01, 2015

I have not yet been a regulated lobbyist for 6 months but will complete training prior to that time, or if my initial registration is for a period less than 6 months, I will complete training before any subsequent registration.

#### 2. Certification of Authorization to Lobby:

I am authorized to act on behalf of the employer/entity identified in Part B.3(a) (and Part B.3(b), if any) for the period set forth in Part B.4(a) and as to the matters set forth in Part B.4(b) herein unless this authority is terminated sooner. This authorization has been granted to me by (Identity of official granting authorization):

Name and Title: Lee Cowen, Principal

Address: 14 Rock Falls Ct, Rockville, MD, 20854

Telephone: 202-285-7777

E-mail: lee@cowenllc.com

### PART D. EXEMPTION STATUS OF EMPLOYER

**An employer who compensates one or more regulated lobbyists is required to separately register as a lobbyist, UNLESS all expenditures requiring registration will be filed by one or more of the regulated lobbyists compensated by the employer. Please indicate status below (ONLY CHECK ONE)**

- a)  The employer claims the exemption from filing its own registration and activity reports because all expenditures requiring registration and reporting will be reported by this registrant.
- b)  The employer does not claim an exemption from filing its own registration and activity report because the registrant will report only expenditures and compensation regard the filer's activity. If this option is selected, the employer must submit a separate registration for lobbying and the required reports.

I hereby make oath or affirm under the penalties of perjury that the contents of this registration are complete, true and correct to the best of my knowledge, information and belief and that I am authorized to engage in lobbying for the employer set forth above in Part B.3.

**MARYLAND STATE ETHICS COMMISSION**

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

**GENERAL LOBBYING ACTIVITY FORM (Form #4)**

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: November 01, 2016 through April 30, 2017

\*This Activity Report was completed by Claudia A. Hrvatin on behalf of Greg Massoni

Termination Report: Yes \_\_\_\_\_ No  x

Termination Date:

**PART A Identification of Regulated Lobbyist (Registration and Employer)**

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

a) Name: Greg Massoni

b) Permanent Address (Include firm name if applicable):  
Firm Name: King & Spalding

Address:  
1700 Pennsylvania Ave, NW  
Suite 200  
Washington, DC 20006

c) Business telephone: 202-737-0500

Cell phone: 443-223-1025

**A. 2)** Identification of others required to register:

a) Was any other person required to register as a lobbyist on behalf of the filer?  
Yes \_\_\_\_\_ No  x

b) If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

a) Did you engage in lobbying activity on behalf of a person or entity other than yourself?  
Yes  x  No \_\_\_\_\_

Name: Cowen Consulting LLC

Permanent Address:

14 Rock Falls Ct  
Rockville, MD 20854

Business Telephone: 202-285-7777

Nature of business: Consulting

Website of employer:

b) Did you represent any other person or entity with regard to the matters covered by this registration?  
Yes  x  No \_\_\_\_\_

Name: Hudson Group Retail LLC  
Permanent Address:

8006 Ellingson Drive  
Chevy Chase, MD 20815  
Telephone: 202-365-1983

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?

Yes \_\_\_\_\_ No  x

**A. 5) Registration Information:**

a) For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?  
November 01, 2016 to October 31, 2017

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

AIRPORTS  
ECONOMIC DEVELOPMENT

c) If known include the bill number(s) of the matter(s) on which you lobby

**A. 6)** Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

**PART B Compensation and Expenses**

**B. 1)** Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

**B. 2)** Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

**B. 3)** Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

**B. 4)** Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

**B. 5)** Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

**B. 6)** Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

- B. 7)** What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report? B-7 \$15,000.00
- Was the amount prorated because you were compensated for services in addition to lobbying activities?  
Yes \_\_\_\_\_ No X
- B. 8)** What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer? B-8 \$0.00
- B. 9)** Did you incur any additional office expenses not reported in B-7 or B-8? Yes \_\_\_\_\_ No X
- If yes, list the amount: B-9 \$0.00
- B. 10)** Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8? Yes \_\_\_\_\_ No X
- If yes, list the amount: B-10 \$0.00
- B. 11)** Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees? Yes \_\_\_\_\_ No X
- If yes, list the amount: B-11 \$0.00
- B. 12)** Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer? Yes \_\_\_\_\_ No X
- If yes, list the name and amount for each.
- Total B-12 Expenses \$0.00
- B. 13)** Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation. Yes \_\_\_\_\_ No X
- If yes, list the amount: B-13 \$0.00
- Please provide an explanation:  
N/A
- TOTAL** \$15,000.00

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No X
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No X
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No X
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

## PART G Signature and Oath

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

(e) *Oath or affirmation for electronically filed statements.* - (1) If the Activity Form (Form #4) filed electronically under subsection (d) of this section is required to be made under oath or affirmation, the oath or affirmation shall be made by a signed statement that:

- i. is in the Activity Form (Form #4) or attached to and made part of the Activity Form (Form #4); and
- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/03/2017



## PART A. GENERAL INFORMATION

What Type of registration are you seeking?

Legislative Action Lobbyist \_\_\_\_\_

Grass Roots Lobbyist \_\_\_\_\_

Executive Action Lobbyist

Non-exempt employer \_\_\_\_\_

Primary purpose of Organization

Is the employer or registrant (if there is no employer) organized and operated for the primary purpose of attempting to influence any legislation or executive action?

Yes \_\_\_\_\_ No

Credit Card Authorization #: 17084644

## PART B. IDENTIFICATION OF REGISTRANT/REGULATED LOBBYIST

### 1. Identifying Information

a) Name of Registrant/Regulated Lobbyist: Greg Massoni

b) Firm Name: King & Spalding

Permanent Address:  
1700 Pennsylvania Ave. NW  
Sulte 200  
Washington, DC 20006

c) Business telephone: 202-737-0500

Cell phone: 443-223-1025

Do you want your telephone number on the published lobbyist list?

Yes  No \_\_\_\_\_

### 2. Identification Of Others Required To Register

a) Will any other person be required to register as a lobbyist on behalf of the person or the organization identified in Part B1 (a)?

Yes \_\_\_\_\_ No

b) If the answer to a) is "Yes", identify each such person below and provide his/her name and address?

### 3. Identification Of Employer

a) Name of persons or organizations that compensates the registrant for activities requiring this registration.

OpenGov

Permanent Address:  
955 Charter Street  
Redwood City, CA 94063

Business Telephone: 650-336-7167

Nature of business: Government transparency and financial intelligence

b) If, in the course of representing the employer identified in Part B.3(a), will you also be representing other entities for which the registrant is not required to file separate registrations?

Yes \_\_\_\_\_ No

### 4. Registration Information

a) State the period (include both beginning and ending month, day, and year) for which this registration is effective:

November 01, 2016 to October 31, 2017

b) Identify the matters on which the registrant expects to act or employ someone to act during the registration period:

ELECTRONIC GOVERNMENT

## PART C. REGISTRANT'S CERTIFICATION

### 1. Certification of Training Compliance:

I hereby certify by checking one of the two options below that I am in compliance with the mandatory training requirements of §5-704.1 of the Public Ethics Law:

I am current in my training status. Date of most recent training: August 01, 2015

I have not yet been a regulated lobbyist for 6 months but will complete training prior to that time, or if my initial registration is for a period less than 6 months, I will complete training before any subsequent registration.

**2. Certification of Authorization to Lobby:**

I am authorized to act on behalf of the employer/entity identified in Part B.3(a) (and Part B.3(b), if any) for the period set forth in Part B.4(a) and as to the matters set forth in Part B.4(b) herein unless this authority is terminated sooner. This authorization has been granted to me by (identity of official granting authorization):

Name and Title: Claudia Arriaga, Worldwide Director of Business Development  
Address: 955 Charter Street, Redwood City, CA 94063  
Telephone: 301-537-3309 E-mail: carriaga@opengov.com

**PART D. EXEMPTION STATUS OF EMPLOYER**

**An employer who compensates one or more regulated lobbyists is required to separately register as a lobbyist, UNLESS all expenditures requiring registration will be filed by one or more of the regulated lobbyists compensated by the employer. Please indicate status below (ONLY CHECK ONE)**

- a)  The employer claims the exemption from filing its own registration and activity reports because all expenditures requiring registration and reporting will be reported by this registrant.
- b)  The employer does not claim an exemption from filing its own registration and activity report because the registrant will report only expenditures and compensation regard the filer's activity. If this option is selected, the employer must submit a separate registration for lobbying and the required reports.

I hereby make oath or affirm under the penalties of perjury that the contents of this registration are complete, true and correct to the best of my knowledge, information and belief and that I am authorized to engage in lobbying for the employer set forth above in Part B.3.

7/3/17

**MARYLAND STATE ETHICS COMMISSION**

45 Calvert Street, 3rd Floor  
Annapolis, Maryland 21401  
410-260-7770  
Toll Free 1-877-669-6085

**GENERAL LOBBYING ACTIVITY FORM (Form #4)**

Read instructions carefully before completing this form. If you had reportable expenses or compensation during the reporting period, complete Parts A, B, C, D, E, F and G of the Activity Report. If you had no reportable compensation or expenses during the reporting period, but were registered to engage in lobbying, check here \_\_\_\_\_ and complete Parts A, E, F, and G. If additional forms are required for this employer, those forms should be attached to and made part of this filing.

Activity Report for reporting period: November 01, 2016 through April 30, 2017

\*This Activity Report was completed by Claudia A. Hrvatin on behalf of Greg Massoni

Termination Report: Yes \_\_\_\_\_ No   x  

Termination Date:

**PART A Identification of Regulated Lobbyist (Registration and Employer)**

**A. 1)** Identifying Information (complete all blanks, compare to registration form, and explain any differences)

a) Name: Greg Massoni

b) Permanent Address (Include firm name if applicable):  
Firm Name: King & Spalding

Address:  
1700 Pennsylvania Ave. NW  
Suite 200  
Washington, DC 20006

c) Business telephone: 202-737-0500

Cell phone: 443-223-1025

**A. 2)** Identification of others required to register:

a) Was any other person required to register as a lobbyist on behalf of the filer?  
Yes \_\_\_\_\_ No   x  

b) If the answer to a) is "Yes", identify each such person below and give their name and address:

**A. 3)** Identification of employer (complete only if registrant acts on behalf of another):

a) Did you engage in lobbying activity on behalf of a person or entity other than yourself?  
Yes   x   No \_\_\_\_\_

Name: OpenGov

Permanent Address:  
955 Charter Street  
Redwood City, CA 94063

Business Telephone: 650-336-7167

Nature of business: Government transparency and financial intelligence

Website of employer: www.opengov.com

b) Did you represent any other person or entity with regard to the matters covered by this registration?  
Yes \_\_\_\_\_ No   x  

**A. 4)** Primary purpose of the organization:

Is your employer, or you if there was no employer, organized and operated for the primary purpose of attempting to influence any legislative or executive action?  
Yes \_\_\_\_\_ No   x  

**A. 5)** Registration Information:

a) For what period of registration did you engage in lobbying activity for this employer, or for yourself if you did not have an employer?  
November 01, 2016 to October 31, 2017

b) What were the matters on which you or someone in your employ engaged in lobbying activity during the registration period covered by this report?

ELECTRONIC GOVERNMENT

c) If known include the bill number(s) of the matter(s) on which you lobby

A. 6) Did the employer claim the status of exempt employer on the registration form? If that exemption is no longer claimed or should be amended, please provide an explanation for the change in the field below.

Yes  No

If the exemption claimed differs from the registration form, please explain in writing:

## PART B Compensation and Expenses

B. 1) Did you provide any meals and beverages for officials or employees or their immediate families?

Yes  No

If yes, what was the exact amount?

B-1 \$0.00

B. 2) Did you incur any expenses for special events, including dinners and receptions, entertainment and other functions to which all members of the General Assembly, either house thereof, all members of any standing committee or all members of a formally recognized (for ethics purposes) county or regional delegation have received written invitations.

Yes  No

If yes, list date, location, group of invitees who benefited and total expenses for each event.

Total B-2  
Expenses \$0.00

B. 3) Did you incur any expenses for food, lodging, or scheduled entertainment of officials and employees for a meeting which were given in return for participation in a panel or speaking engagement at a meeting?

Yes  No

If yes, list date, location, and total expense for each meeting. If the total amount in expenses on any one official or employee is \$200 or more for any meeting, also include the person's name and the amount expended for the person at the meeting.

Total B-3  
Expenses \$0.00

B. 4) Did you incur any expenses for food and beverages received by any member(s) of the General Assembly at approved legislative organization meetings?

Yes  No

If yes, list location, name of legislative organization, date and total expense for each meeting.

Total B-4  
Expenses \$0.00

B. 5) Did you incur any expense for a ticket or free admission to any members of the General Assembly to attend charitable, cultural or political events to which the event holder invited all members of a legislative unit?

Yes  No

If yes, list the name of the event, location, date, name of legislative unit and total expense for each event.

Total B-5  
Expenses \$0.00

B. 6) Did you give any gifts to or for officials or employees or their immediate families other than those that were reported in B-1 through B-5? (not including sums reported in B-1, B-2, B-3, B-4 and B-5)

Yes  No

If yes, list the amount:

B-6 \$0.00

**Subtotal of Items B-1 through B-6 - \$0.00**

B. 7) What was the total compensation paid to you, not including any sums reported in any other section of Part B of this report?

B-7 \$30,000.00

Was the amount prorated because you were compensated for services in addition to lobbying activities?

Yes  No

<b>B. 8)</b>	What was the total for salaries, compensation and reimbursed expenses you paid to your staff related to lobbying services for this employer?	B-8	<u>\$0.00</u>
<b>B. 9)</b>	Did you incur any additional office expenses not reported in B-7 or B-8? Yes _____ No <u>X</u> If yes, list the amount:	B-9	<u>\$0.00</u>
<b>B. 10)</b>	Did you incur any cost for professional and technical research and assistance not reported in B-7 or B-8? Yes _____ No <u>X</u> If yes, list the amount:	B-10	<u>\$0.00</u>
<b>B. 11)</b>	Did you incur any expenses for publications or expenses related to expressly encouraging persons to communicate with officials or employees? Yes _____ No <u>X</u> If yes, list the amount:	B-11	<u>\$0.00</u>
<b>B. 12)</b>	Did you pay any fees or incur any expenses for witnesses who were engaged to appear on behalf of your employer? Yes _____ No <u>X</u> If yes, list the name and amount for each.	Total B-12 Expenses	<u>\$0.00</u>
<b>B. 13)</b>	Did you incur any other expenses for this employer not otherwise accounted for in this report? If yes, list the amount and provide an explanation. Yes _____ No <u>X</u> If yes, list the amount: Please provide an explanation: <u>N/A</u>	B-13	<u>\$0.00</u>
			<b>TOTAL <u>\$30,000.00</u></b>

- C.** Did you give any gifts or participate in the giving of any gifts with a cumulative value of \$75 or more? (Forms 13C and 13D, Section 15-704(c))  
Yes \_\_\_\_\_ No X
- D.** Did you give any gifts or participate in the giving of any gifts of meals and beverages to elected Executive Officials? (Forms 13A and 13B, Section 15-705)  
Yes \_\_\_\_\_ No X
- E.** Did you engage in any business transactions with officials during the reporting period? (Form 21, Section 15-706)  
Yes \_\_\_\_\_ No X
- F.** During the reporting period, did you make any political contributions, either directly or indirectly, for the benefit of the Governor, Lt Governor, Attorney General, Comptroller member of the General Assembly or a candidate for election to any of those offices?  
Yes \_\_\_\_\_ No X

Please provide any narrative that you may wish with regard to any of the figures or responses in the report:

**PART G Signature and Oath**

The Public Ethics Law provides the following:

(d) *Development of electronic filing procedures.* - The Ethics Commission shall develop procedures under which a statement under this subtitle may be filed electronically and without additional cost to the individual who files the statement.

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- ii. is made expressly under the penalties for perjury.

(2) A signed statement made under paragraph (1) of this subsection subjects the individual making it to the penalties for perjury to the same extent as an oath or affirmation made before an individual authorized to administer oaths.

X I have read and I understand that by submission of this electronically filed Activity Form (Form #4), I hereby swear or affirm that the information contained in it is complete and accurate to the best of my knowledge and belief.

Date: 07/03/2017