

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

Year 2013

Non-Profit For-Profit

ORIGINAL

LOBBYIST REGISTRATION FORM
(See next page for instructions)

AMENDMENT

Filing Fee Enclosed \$250.00
 \$50.00

1. (a) Registrant's Name American Coatings Association (b) Daytime Phone Number 202.462.6272
(c) Permanent Address 1500 Rhode Island Avenue, N.W. Washington, DC 20005
(Street Address) (City, State, Zip Code)

(d) Temporary Address (while lobbying) _____
(Street Address) (City, State, Zip Code)

(e) E-Mail Address TGraves@paint.org

2. Lobbyist(s) Working for Registrant: List the full name of each in-house person employed and each individual retained by you to lobby on your behalf. If you do not employ an in-house person or retain an individual to lobby, state non-applicable.

(a) Name William N. Hall - Venable LLP (b) Name _____
Address 575 7th Street, N.W. Address _____
(Street Address) (Street Address)
Washington, DC 20004 (City, State, Zip Code)

Daytime Phone Number 202.344.4631 Daytime Phone Number _____
 If more space is needed, check box and attach OCF Supplemental Sheet.

3. Person Compensating Registrant: List the full name of each client with whom you have an agreement for compensation to provide lobbying services. If you do not contract to provide lobbying services, state non-applicable.

(a) Name American Coatings Association - Tom Graves (b) Daytime Phone Number 202.462.6272
(c) Address 1500 Rhode Island Avenue, N.W. Washington, DC 20005
(Street Address) (City, State, Zip Code)

(d) Nature of Business Non-Profit Trade Association

4. Terms of Compensation: (a) Hourly (b) Ongoing
(Salary) (Duration of Employment)

If more space is needed, check box and attach OCF Supplemental Sheet.

5. Identify each matter by subject and formal designation on which the lobbyist/registrant expects to lobby. Attach a Supplemental Sheet if additional space is needed.

Lobbying regarding DC lead hazard legislation

I, the undersigned, declare under oath and on penalty of perjury that the statements contained in this Lobbyist Registration Form are, to the best of my knowledge, true, correct, and complete.

Thomas J. Graves

Signature of Registrant (or, if not an individual, an authorized officer or agent* of registrant must sign)

*The lobbyist retained by contract to provide lobbying services may not sign on behalf of the compensating registrant.

Subscribed and sworn to before me on this 10th day of January 2013

Martha M. Stovall

Notary Public

My Commission Expires: July 31, 2015

Rev. 12/2012

MARTHA M. STOVALL
Notary Public, District of Columbia
My Commission Expires July 31, 2015

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