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Go

Clerk of the House of Representatives	Secretary of the Senate
Legislative Resource Center	Office of Public Records
B-106 Cannon Building	232 Hart Building
Washington, DC 20515	Washington, DC 20510

SECRETARY OF THE SENATE

05 FEB -2 PM 4:52

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

1. Effective Date of Registration 1/1/81

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name Organization Golin Harris

Address 2200 Clarendon Blvd., Suite 1100

City Arlington State VA Zip 22201 U

4. Principal place of business (if different than line 3)

City State Zip

5. Telephone number and contact name

Prefix Full Name

703/741-7500 Contact Mr. C Michael Fulton E-mail

6. General description of registrant's business or activities

Consultant

CLIENT

*A Lobbying firm is required to file a separate registration for each client. **Organizations employing in-house lobbyists should check the** labeled "Self" and proceed to line 10.* ☐ *Self*

7. Client name The Women's Museum - An Institute for the Fu

Address 3800 Parry Avenue

City Dallas State TX Zip 75226

8. Principal place of business (if different than line 7)

City State Zip

9. General description of client's business or activities Providing a forum for c

celebration and communication of the immeasurable

LOBBYISTS

contributions women have made to society

Go to page 3 to add more

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person section has served as a "covered executive branch official" or "covered legislative branch official" within two years of fi a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name First	Name Last	Name Suffix	Covered Official Position (if applicable)
C.	Fulton	Michael	
Erin	Buechel		Sen. Arlen Specter

Registrant Name Colin Harris Client Name The Women's M

LOBBYING ISSUES

Find the code to select below. Go to page 3 to add more lobby

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

EDU

12. Specific lobbying issues (current and anticipated)

Identify and secure federal grants an appropriations for museum exhibits, educati and community outreach.

AFFILIATED ORGANIZATIONS

Go to page 3 to add more orga

13. Is there an entity other than the client that contributes more than $10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

No ⇨ Go to line 14. ☒ ⇨ Complete the rest of this section for each entity matchin criteria above, then proceed to line 14.

Name	Address	Principal place of Busine (city and state or count

FOREIGN ENTITIES

Go to page 3 to add more forei

14. Is there any foreign entity that:

a) holds at least 20% equitable ownership in the client or any organization identified on line 13: ☐

b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidies acti the client or any organization identified on line 13; ☐

c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of lobbying activity?

No ⇨ Sign and date the registration. ☒ ⇨ Complete the rest of this section for each entit matching the criteria above, then sign and dat registration.

Name	Address Street Address City State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C p

Form Com

Printed Name and Title C Michael Fulton, Executive

Registrant Name Golin Harris Client Name The Women's M

ADDITIONAL LOBBYISTS

Return to page 2 to fini

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

Name First	Name Last	Name Suffix	Covered Official Position (if applicable)
N/A			

ADDITIONAL LOBBYING ISSUES

Return to page 2 to finis

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

Find the code to select below.

N/A

AFFILIATED ORGANIZATIONS

Return to page 2 to finis

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, numb

Name	Address	Principal place of Busine (city and state or count
N/A		

ADDITIONAL FOREIGN ENTITIES

Return to page 2 to finish

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

Name	Address Street Address City State/Province Country	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	perce
N/A				

Add an additional supplementary informati

Printed Name and Title C. Michael Fulton, Executive VP