Clerk of the House of Representatives Legislative Resource Center 135 Cannon Building Washington, DC 20515 http://lobbyingdisclosure.house.gov Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 http://www.senate.gov/lobby

## **LOBBYING REPORT**

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name Organization/Lobbying Firm Self Employed PMI Global Services Inc.	ed Individual	
2. Address Address1 1399 New York Avenue NW	Address2 Suite 400	
City Washington State	<u>DC</u> Zip Code <u>20005</u>	Country <u>USA</u>
3. Principal place of business (if different than line 2)		
City State	Zip Code	Country
4a. Contact Name b. Telephone N Ms. Evann R. Whitelam 4153896800	Tumber c. E-mail ewhitelam@nmgovlaw.com	5. Senate ID# 400265213-12
7. Client Name Self Check if client is a state PMI Global Services Inc.	or local government or instrumentality	6. House ID# 401470000
9. Check if this filing amends a previously filed version of this report  10. Check if this is a Termination Report  Termination  INCOME OR EXPENSES - YOU	Date 11. No Lobbying Issue  J MUST complete either Line 12 or Line	•
12. Lobbying	13. Organizations	
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSE</b> relating to lobbying activities for this re	porting period were:
<u>Less than \$5,000</u>	<u>Less than \$5,000</u>	
\$5,000 or more \$	\$5,000 or more	
Provide a good faith estimate, rounded to the nearest \$10,000, of all lobbying related income for the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).	<b>14. REPORTING</b> Check box to indicate expense a See instructions for description of options.	ccounting method.
	Method A. Reporting amounts using LDA defi	nitions only
	Method B. Reporting amounts under section 60 Internal Revenue Code	033(b)(8) of the
	Method C. Reporting amounts under section 16 Revenue Code	52(e) of the Internal
Signature Digitally Signed By: Evann R. Whitelam, Attorney & Age	ent for Filer Da	10/21/2024 6:56:33 PM

		-	ssue areas in which the registrant engaged in lobbyi e information as requested. Add additional page(s) a	-
15. General issue area c	ode TAX			
16. Specific lobbying is	sues			
Discussions related to fe	ederal excise tax drawback laws and	their application to man	ufacturing of tobacco products	
17. House(s) of Congres	ss and Federal agencies Check i	f None		
U.S. HOUSE OF REPR	ESENTATIVES, U.S. SENATE			
18. Name of each indivi	dual who acted as a lobbyist in this i	issue area		
First Name	Last Name	Suffix	Covered Official Position (if applicable)	New
Moyer	МсСоу			
Zachary	Paulsen			
Kelly	Lungren McCollum			
19. Interest of each fore	ign entity in the specific issues listed	l on line 16 above C	Theck if None	_

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Add additional page(s) as needed.

- 15. General issue area code TOB
- 16. Specific lobbying issues

H.R. 9425: Tobacco Us	er Fee Modernization Act of 2024; a	all provisions				
Discussions related to i	mplementation of P.L. 111-31 - Fam	ily Smoking Prevention	and Tobacco Control Act			
Discussions related to t	obacco harm reduction and reduced	risk products				
Discussions related to e	enforcement of illicit tobacco produc	ts, including importation	n of counterfeit products			
Discussions related to u	user fees for tobacco and electronic n	icotine delivery system	products			
Discussions related to e	efforts to prevent youth access to tob	acco products				
17. House(s) of Congre	ss and Federal agencies Check	if None				
U.S. HOUSE OF REPF	RESENTATIVES, U.S. SENATE, Fo	ood & Drug Administrati	on (FDA)			
18. Name of each indiv	idual who acted as a lobbyist in this	issue area				
First Name	Last Name	Suffix	Covered Official Position (if applicable)	New		
Keagan	Lenihan					
Moyer McCoy						
Zachary Paulsen						
Diego Zambrano						
Kelly						
19. Interest of each fore	eign entity in the specific issues listed	d on line 16 above	Check if None			

Zachary

16. Specific lobbying issues

Paulsen

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Add additional page(s) as needed.

- 15. General issue area code FOR
- Discussions related to international regulation of tobacco products

  Discussions related to U.S. policy guidance provided to executive branch personnel

  17. House(s) of Congress and Federal agencies Check if None

  U.S. HOUSE OF REPRESENTATIVES, U.S. SENATE

  18. Name of each individual who acted as a lobbyist in this issue area

  First Name Last Name Suffix Covered Official Position (if applicable) New

	•		ssue areas in which the registrant engaged in lobbyir e information as requested. Add additional page(s) a	•
15. General issue area o	code GOV			
16. Specific lobbying is	ssues			
Discussions related to f	ederal funding for the Centers for D	isease Control and Preven	ntion	
17. House(s) of Congre	ss and Federal agencies Check	if None		
U.S. HOUSE OF REP	RESENTATIVES, U.S. SENATE			
18. Name of each indiv	idual who acted as a lobbyist in this	issue area		
First Name	Last Name	Suffix	Covered Official Position (if applicable)	New
Zachary	Paulsen			
19. Interest of each fore	sign entity in the specific issues liste	d on line 16 above C	heck if None	

	ode HCR			
16. Specific lobbying iss	ues			
Discussions related to to	bacco harm reduction and alternative	e nicotine products for a	adults	
17. House(s) of Congress	s and Federal agencies  Check if	`None		
U.S. HOUSE OF REPRI	ESENTATIVES, U.S. SENATE, Foc	od & Drug Administrati	on (FDA), Health & Human Services - Dep	t of (HHS)
	lual who acted as a lobbyist in this is		1	,
First Name	Last Name	Suffix	Covered Official Position (if applica	ble) New
Keagan	Lenihan		Covered Official Lostion (it applied	
Diego	Zambrano			
Moyer	МсСоу			
Zachary	Paulsen			
Kelly	Lungren McCollum			
20. Client new address  Address	ge - Complete ONLY where regist			Country
20. Client new address  Address  City		State _	s changed.  Zip Code	Country
20. Client new address  Address  City  21. Client new principal	place of business (if different than li	State ne 20)		
20. Client new address  Address  City  21. Client new principal  City		State ne 20)	Zip Code	
20. Client new address  Address City  21. Client new principal City  22. New General descrip	place of business (if different than li tion of client's business or activities	State	Zip Code Zip Code	
20. Client new address  Address City  21. Client new principal City  22. New General descrip  LOBBYIST UPD  23. Name of each previo	place of business (if different than li tion of client's business or activities  ATE  usly reported individual who is no lo	ne 20) State _ onger expected to act as	Zip Code Zip Code a lobbyist for the client	Country
20. Client new address  Address City 21. Client new principal City 22. New General descrip  LOBBYIST UPD 23. Name of each previo	place of business (if different than li tion of client's business or activities	ne 20)  State  onger expected to act as  Suffix  First	Zip Code Zip Code	
20. Client new address  Address City 21. Client new principal City 22. New General descrip  LOBBYIST UPD 23. Name of each previo	place of business (if different than li tion of client's business or activities  ATE  usly reported individual who is no lo	ne 20) State _ onger expected to act as	Zip Code Zip Code a lobbyist for the client	Country
20. Client new address  Address City  21. Client new principal City  22. New General descrip  LOBBYIST UPD  23. Name of each previo  First Name	place of business (if different than li tion of client's business or activities  ATE  usly reported individual who is no lo	state	Zip Code Zip Code a lobbyist for the client	Country

## AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s) Internet Address: Address Principal Place of Business Street Address Name (city and state or country) City State/Province Zip Country City State Country 26. Name of each previously reported organization that is no longer affiliated with the registrant or client 1 2 3 **FOREIGN ENTITIES** 27. Add the following foreign entities: Address Amount of Ownership Principal place of business Street Address Name contribution for percentage in (city and state or country) lobbying activities client City State/Province Country City % State Country 28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, client or affiliated organization **1 2** 6 **CONVICTIONS DISCLOSURE** 

29. Have any of	of the lobbyists	listed on thi	is report been	convicted in a	Federal of	or State (	Court of	an offense	involving	bribery,	extortion,	embezzleme	nt,
an illegal kick	back, tax evasio	n, fraud, a c	conflict of inte	erest, making a	false sta	tement, <sub>I</sub>	perjury, o	or money 1	aundering?	)			

No Yes

Lobbyist Name	Description of Offense(s)