EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2008
(Fill in year.)

708
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 2-27-08
Leg. 08
Ck# 1805
$110.00
ack ✓
3071322

Instructions

- Print in ink or type.
- Complete form and return with $110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Sexeny (Last) Stephen (First) L. (MI)

2. BUSINESS PHONE 781-619-2440 (Area Code and Phone Number)

3. FAX NUMBER 973-394-4635 (Linda Howard)

4. BUSINESS ADDRESS 690 Canton St. (Street and No.) Westwood (City) MA (State) 02090 (Zip)

MAILING ADDRESS _____ (Street and No.) _____ (City) _____ (State) _____ (Zip)

5. EMPLOYER New York Life Investment Management LLC

6. EMPLOYER'S ADDRESS 169 Lackawanna Ave (Street and No.) Parsippany (City) NJ (State) 07054 (Zip)

7. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name New York Life Investment Management LLC
   Address 169 Lackawanna Ave Parsippany, NJ 07054
   Business or purpose Investment Advisor
   Does this ~~person~~ firm pay you? Yes
   If No, who pays you? _____

EXECUTIVE LOBBYING REGISTRATION FORM

Executive Lobbyist Registration No.

2. Name_____

Address_____

Business or purpose_____

Does this person pay you?_____

If No, who pays you?_____

3. Name_____

Address_____

Business or purpose_____

Does this person pay you?_____

If No, who pays you?_____

4. Name_____

Address_____

Business or purpose_____

Does this person pay you?_____

If No, who pays you?_____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist