LOBBYING REPORT

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

<table>
<thead>
<tr>
<th>1. Reporting Name</th>
<th>Adam Emanuel</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Address</td>
<td>2219 49th St NW</td>
</tr>
<tr>
<td>3. Principal Place of Business (If different from line 2):</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>Washington</td>
</tr>
<tr>
<td>County</td>
<td>DC 20007</td>
</tr>
<tr>
<td>4. Contact Name</td>
<td>Adam Emanuel</td>
</tr>
<tr>
<td>Telephone</td>
<td>202-338-8600</td>
</tr>
<tr>
<td>5. Senate ID #</td>
<td>18461-24</td>
</tr>
<tr>
<td>6. House ID #</td>
<td>000</td>
</tr>
</tbody>
</table>

TYPE OF REPORT

8. Year (Midyear (January 1-June 30) OR Year End (July 1-December 31))

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

- Less than $10,000
- $10,000 or more

Provide a good faith estimate, rounded to the nearest $10,000, of all lobbying-related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).

EXPENSES relating to lobbying activities for this reporting period were:

- Less than $10,000
- $10,000 or more

Expenses (rounded $10,000)

14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.

- Method A. Reporting amounts using LDA definitions only
- Method B. Reporting amounts under section 6023(b)(5) of the Internal Revenue Code
- Method C. Reporting amounts under section 162(c) of the Internal Revenue Code

Signature: Adam Emanuel

Printed Name and Title: Adam Emanuel, President

LD-3 (REV. 1-94)
REGISTRANT NAME: Adam Emanuel

CLIENT NAME: Israel Aircraft Industries

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. Attach additional page(s) as needed.

15. General issue area code(s) [Add/Law one per page]

16. Specific lobbying issues
   - Crash attenuating troop seats for military helicopters
   - Add money for funding for "SAFETY ENHANCEMENTS" on
     helicopters

17. House(s) of Congress and Federal agencies contacted
   [☐] Check if [None
   SACD
   SASL
   HAAD
   HASC

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Covered Official Position (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td></td>
</tr>
</tbody>
</table>

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

   Yes

Signature: Adam Emanuel
Date: 8/13/99

Printed Name and Title: Adam Emanuel

Form LD-2 (Rev.6/98)
### Information Update Page
- Complete ONLY where registration information has changed.

#### Lobbyist Update
23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client.

#### Issue Update
24. General lobbying issues previously reported that no longer pertain.

#### Affiliated Organizations
25. Add the following affiliated organization(s)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Principal Place of Business (city and state or country)</th>
</tr>
</thead>
</table>

#### Foreign Entities
27. Add the following foreign entities

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Principal place of business (city and state or country)</th>
<th>Amount of contribution for lobbying activities</th>
<th>Ownership percentage in client</th>
</tr>
</thead>
<tbody>
<tr>
<td>IAI Ltd</td>
<td>Ben Gurion Int’l Airport</td>
<td>ISRAEL</td>
<td>Less than $10,000</td>
<td>100%</td>
</tr>
</tbody>
</table>

28. Name of each previously reported foreign entity that no longer owns, gg controls, gg is affiliated with the registrant, client or affiliated organization: None.

**Signature** [Signature]

**Date** 8/13/99

**Printed Name and Title** [Name] [Title]