

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
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SECRETARY OF THE SENATE  
03 AUG 21 PM 2:35

## LOBBYING REPORT

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

1. Registrant Name <b>Navigant Consulting, Inc. (formerly Chambers Assoc.)</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>805 15th Street, NW, Suite #500</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20005</b> <b>USA</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Mary S. Lyman</b>	Telephone <b>202-371-9770</b>	E-mail (optional) <b>lyman@navigantconsulting.com</b>	5. Senate ID # <b>8828-75</b>
7. Client Name <input type="checkbox"/> Self <b>Coalition of Publicly Traded Partnerships</b>	6. House ID # <b>30864001</b>		

**TYPE OF REPORT** 8. Year 2003 Midyear (January 1-June 30)  **OR** Year End (July 1-Dec)

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

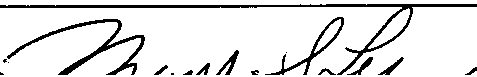
10. Check if this is a Termination Report  >> Termination Date \_\_\_\_\_

11. No Lobby

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$40,000.00</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$2)
Provide a good faith estimate, rounded to the nearest \$20,000 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).	14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of
	<input type="checkbox"/> Method A. Reporting amounts using LDA definit
	<input type="checkbox"/> Method B. Reporting amounts under section 603: the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162: Internal Revenue Code

Signature



Signature  Date \_\_\_\_\_

Printed Name and Title Mary S. Lyman - Senior Engagement Manager Pa

Registrant Name: Navigant Consulting, Inc. (formerly Chambers Assoc.)

Client Name: Coalition of Publicly Traded Partnerships

**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 TAX (one per page)

16. Specific Lobbying issues

**H.R.1536 , Publicly Traded Partnership Equity Act of 2003, Treat PTP income as qualifying income for RIC  
 H.R.6 , To enhance energy conservation and research and development, to provide for security and diversity  
 energy supply for the American people, and for other purposes, Include H.R. 1536/S.752 in energy bill  
 S.1149 , Energy Tax Incentives Act of 2003, Include H.R. 1536/S.752 in energy bill  
 S.597 , Energy Tax Incentives Act of 2003, Include H.R. 1536/S.752 in energy bill  
 S.752 , A bill to amend the Internal Revenue Code of 1986 to treat distributions from publicly traded partne  
 qualifying income of regulated investment companies, and for other purposes,**

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

**Department of Treasury  
 House of Representatives  
 Senate**

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

Name	Covered Official Position (if applicable)
<b>Lyman, Mary S.</b>	
<b>Signer, William</b>	

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title **Mary S. Lyman - Senior Engagement Manager** \_\_\_\_\_ Pa: