

SECRETARY OF THE GOVERNMENT
05 FEB 17 PM

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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LOBBYING REPORT

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

1. Registrant name			
Organization	MANUEL LUJAN ASSOCIATES		
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1	1209 CALIFORNIA NE		
City	ALBUQUERQUE	State	N.M.
		Zip Code	87110-6823
		Country	
3. Principal place of business (if different than line 2)			
City	SAME AS LINE 2	State	
		Zip Code	
		Country	
4a. Contact Name	b. Telephone number	c. E-mail	5. Senate ID #
Prefix Full Name			23281-51
Mr. MANUEL LUJAN, JR.	(505) 268-1735		
7. Client Name	<input type="checkbox"/> Self		6. House ID #
INSTITUTE OF AMERICAN INDIAN ARTS			30796003

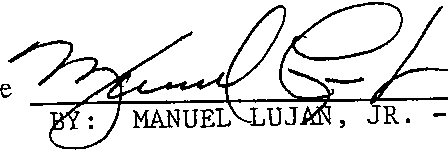
TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report
 10. Check if this is a Termination Report ⇒ Termination Date 02/17/2005 11. No Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>36,000.00</u></p> <p>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).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>
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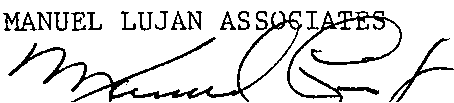
Printed Name and Title



BY: MANUEL LUJAN, JR. - OWNER

MANUEL LUJAN ASSOCIATES

Printed Name and Title

A handwritten signature in black ink, appearing to read "Manuel Lujan", written over the printed company name.

Registrant Name MANUEL LUJAN ASSOCIATES Client Name INSTITUTE OF AMERICAN IND.

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address

City

State

Zip Code

Country

21. Client new principal place of business (if different than line 20)

City

State

Zip Code

Country

22. New general description of client's business or activities

LOBBYIST UPDATE

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

First Name

Last Name

Suffix

First Name

Last Name

1

NONE

3

2

4

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that **no longer** pertain

NONE

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of B (city and state or c
NONE	Address C/S/Z	City State Country
	Address C/S/Z	City State

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

1

NONE

2

3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
NONE	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 registered affiliated organization

1

NONE

3

5

2

4

6

MANUEL LUJAN ASSOCIATES

Printed Name and Title


BY: MANUEL LUJAN, JR. - OWNER