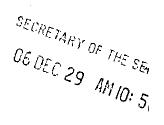
Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



## LOBBYING REGISTRATION Lobbying Disclosure Act of 1995 (Section 4)

|   | 1. Effective Date of Registration  | 10/24/2006  |
|---|--|---|
| House Identification Number 30873 S                     |  | 5153-   |
|   |  |   |
| Donelson Bearman Ca                                     | aldwell & Berkowitz  |   |
|   | 6th Floor  |   |
| State DC  | Zip 20004  | USA   |
| nt than line 3)   |  |   |
| State   | Zip  |   |
| Prefix Full Name  | Faylor E-maj  btaylor@bakerd   | onelson.com   |
| .,,,,   |  |   |
| Metals Exporters Assoc                                  | iation   |   |
| State   | Zip  | Country TKY   |
| nt than line 7)   | •  |   |
| State   | Zip  | Country   |
| ss or activities  |  |   |
| or is expected to act as a live branch official" or "cc | lobbyist for the client identified on lin<br>overed legislative branch official" wi  | o page 3 to add more lob<br>le 7. If any person list<br>thin two years of first   |
| tive and/or legislative pos                             | Covered Official Position (if  |   |
| tive and/or legislative pos<br>                         | Covered Official Position (if  |   |
| tive and/or legislative pos<br>Suffix                   | Covered Official Position (if  |   |
| tive and/or legislative pos<br>Suffix                   | Covered Official Position (if  |   |
| tive and/or legislative pos<br>Suffix                   | Covered Official Position (if  |   |
|   | State DC  Int than line 3)  State  Prefix Full Name Intact Ms. Elizabeth 1  Issiness or activities  Separate registration for each concentration of the separate separate separate registration for each concentration.  Self  Metals Exporters Associated to act as a line for its expected to act as a line for its ex | State DC Zip 20004  Int than line 3)  State Zip  Prefix Full Name Intact Ms. Elizabeth Taylor E-mail btaylor@bakerd  Isiness or activities  Separate registration for each client. Organizations employing in-house lobb  All Self  Metals Exporters Association  I Cod., Bahcehevler  State Zip  Int than line 7)  State Zip  State Zip  State Zip  State Zip  Or is expected to act as a lobbyist for the client identified on line |

E LD-1DS (Rev. 4.07)

Page \_1\_\_\_ of \_\_

| LOBBYING ISS   |                            | h <mark>e code to s</mark> e<br>I applicable co |                             |   |                                       | Go to page 3 to add more i  | <del>-</del>                    |  |
|--|----------------------------|---|-----------------------------|---|---------------------------------------|---|---------------------------------|--|
| TRD  |                            |   |                             |   |                                       |   |                                 |  |
| 12. Specific lobbying is<br>Assisting client in ma       |                            |   | of prefere                  | ences status v  | vith the US Go                        | vernment.   |                                 |  |
| AFFILIATED ( 13. Is there an entity o a semiannual perio | ther than the client       | that contribute                                 | es more th                  | an \$10,000 to  | the lobbying a                        | Go to page 3 to add more activities of the registrar                              | nt in                           |  |
| No ⇔ Go to   | line 14.                   | i. Yes⇔   |                             | Complete the rest of this section for each entity matching the criteria above, then proceed to line 14. |                                       |   |                                 |  |
| Name   |                            | Address   |                             |   |                                       | Principal place of Business (city and state or country)                           |                                 |  |
|  |                            |   |                             |   |                                       |   |                                 |  |
| FOREIGN ENT  |                            | _   |                             |   |                                       | Go to page 3 to add more  | e foreign entiti                |  |
| b) directly<br>the clie<br>c) is an af                   | nt or any organization     | ole or in majo<br>on identified o               | or part, pla<br>on line 13; | ns, supervises<br>O <b>r</b>  | , controls, dire                      | ied on line 13: <b>Or</b> ects, finances or subsidicents interest in the outcome. |                                 |  |
| ·  | and date the registra      | tion.   | $\boxtimes$                 | m   |                                       | t of this section for each  |                                 |  |
| Name   | Street Address City        | Address State/Province                          | e Country                   | bus   | l place of<br>iness<br>te or country) | Amount of contribution for lobbying activities                                    | Ownersh<br>percenta<br>in clien |  |
| Istanbul Jewelery<br>Exporters Assn.                     | Kalpakcilar Ca<br>Istanbul | ad. No. 56 Kap                                  | olicarsi<br>TKY             | Istanbu   | I<br>TKY                              | \$0   | 0                               |  |
| l<br> <br> -<br> -<br> Printed Name and Ti               |                            | Johnston, J                                     |                             |   | Educh<br>e - Page 3 of 6              | E John Joseph   | orm Complet                     |  |

Charles R. Johnston, Jr., Shareholder
Filing #c617c3f8-7b77-4355-9df4-e5da8c87c3ae - Page 3 of 6

| Registrant Name                         | Donelson Bearma                        | n Caldwell & Berkowitz      | Client Name Istanbul Mine                                       | eral and Metals Exporters               | s Associatio                            |  |
|---|--|-----------------------------|---|---|---|--|
| ADDITIONAL                              | LOBBYIST                               | S                           |   | Return to page 2 to                     | finish the form                         |  |
| 10 Supplemental. Li                     | st any additional lo                   | obbyists for this client no | t listed on page 1, number 10                                   |   |   |  |
| First                                   | Name                                   | Suffix                      | Covered Official F  | Position (if applicable)                |   |  |
| rust                                    | Last                                   | Sumx                        | <u> </u>  |   | <u>.</u>                                |  |
| .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  |                             |   | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  |
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| *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                             |   |   |   |  |
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|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
| ADDITIONAL                              | LOBBYING                               | GISSUES                     |   | Return to page 2 to                     | finish the for                          |  |
|   |  |                             | ional codes for issues not lis                                  | ted on page 2, number 1                 | 1.                                      |  |
| Find the code to                        | select below.                          |                             |   |   |   |  |
| ·                                       |  |                             |   |   |   |  |
|   |  | TIONG                       |   | Batum ta anga 2 ta                      | finish the for                          |  |
| AFFILIATED                              |  |                             |   | Return to page 2 to                     |   |  |
| 3 Supplemental.                         | List any other affili                  | iated organization that m   | eets the criteria specified and                                 | d is not listed on page 2,              | number 13.                              |  |
| N                                       | lame                                   | I                           | Address Principal place of Business (city and state or country) |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
| ADDITIONAL                              | FOREIGN                                | ENTITIES                    |   | Return to page 2 to                     | finish the for                          |  |
|   |  |                             | iteria specified and is not list                                | ted on page 2, number 14                | 1.                                      |  |
| Name                                    |  | Address                     | Principal place of business                                     | Amount of contribution                  | Ownersl                                 |  |
|   | Street Address<br>City                 | State/Province Country      | (city and state or country)                                     | for lobbying activities                 | percentage ii                           |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             |   |   |   |  |
|   |  |                             | Add an .  | additional supplementary in:            | formation paç                           |  |
|   |  |                             | $\wedge$  |   |   |  |
| Printed Name and                        | Title Charles F                        | R. Johnston, Jr., Sha       | reholder A.D.   | K Solveting                             | ť                                       |  |
| rrimed maine and                        | Title Chance                           |                             |   | 7                                       | <u></u>                                 |  |

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