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# LOBBYING REP

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

<b>1. Registrant Name</b> <input checked="" type="checkbox"/> Organization <input type="checkbox"/> Individual							
PODESTA GROUP, INC.							
<b>2. Address</b> <input type="checkbox"/> Check if different than previously reported							
Address1	1001 G STREET, NW	Address2	SUITE 900 EAST				
City	WASHINGTON	State	DC	Zip Code	20001 -	Cc	
<b>3. Principal place of business (if different than line 2)</b>							
City		State		Zip Code		Cc	
<b>4a. Contact Name</b>		<b>b. Telephone Number</b>		<b>c. E-mail</b>		<b>5. St</b>	
Ms. KIMBERLEY FRITTS		(202) 393-1010		LOBBYING@PODESTA.COM		31	
<b>7. Client Name</b> <input type="checkbox"/> Self						<b>6. H</b>	
LOCKHEED MARTIN CORPORATION						31	

**TYPE OF REPORT** 8. Year 2007 Midyear (January 1-June 30)  Year End (July 1-Dec 31)

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 Lobbying Act

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

12. Lobbying	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSE</b> 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>100,000.00</u>	\$10,000 or more <input type="checkbox"/> \$ _____
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).	<b>14. REPORTING</b> Check box to indicate accounting method. See instructions for descriptive method. <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitive method. <input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 603 Internal Revenue Code <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162 Internal Revenue Code

Signature  Digitally Signed By: Kimberley D Fritts Date 08

US, DST ACES Business Representative, PODESTA GROUP INC., Kimberley D Fritts

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**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 **BUD** Budget/Appropriations (one per page)

16. Specific lobbying issues

H.R. 1585 - DOD FY08 Authorization Act.  
S. 1547 - DOD FY08 Authorization Act.

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

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

Name			Covered Official Position (if applicable)
First	Last	Suffix	
Teal	Baker		
Sharon	Cohen		
Anthony	Podesta		
Elizabeth	Morra		
John	Scofield		Comm Dir., House Approps. Committee
Andrew	Kauders		Sr Adv, Sen. Menendez; ED, House Dem Cau
Daniele	Baierlein		
John	Scofield		Comm Dir., House Approps. Committee

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

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

20. Client new address

Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

**LOBBYIST UPDATE**

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

	First Name	Last Name	Suffix	First Name	Last Name
1	Teal	Baker		3	
2				4	

**ISSUE UPDATE**

24. General lobbying issue that no longer pertain

DEF

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address				Principal Place of (city and state o
	Street Address City	State/Province	Zip	Country	
					City State Co City State Co

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

1	2	3
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**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	Street Address 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 registrant, client or affiliated o

1	3	5
2	4	6

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