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LOBBYING REPORT

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

1. Registrant Name Hogan & Hartson L.L.P.			
2. Address <input type="checkbox"/> Check if different than previously reported 555 13th Street, N.W. Washington, DC 20004-1109			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name Gilliland, C. Michael	Telephone (202) 637-5619	E-mail (optional) CMGilliland@hhlaw.com	5. Senate ID #
7. Client Name <input type="checkbox"/> Self Iomai Corporation			6. House ID #

TYPE OF REPORT 8. Year 2004 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 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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</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 type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</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 6115 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature

C. Michael Gilliland

Signature _____

Printed Name and Title Gilliland, C. Michael (Partner)

LD-2 (REV. 6/98)

Registrant Name Hogan & Hartson L.L.P. Client Name Iomai Corporation

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code and attach additional page(s) as needed.

15. General issue area code APP (one per page)

16. Specific lobbying issues

Funding for medical devices - Defense Appropriations bill - H.R. 4613 and S. 2559

17. House(s) of Congress and Federal agencies contacted

☐ Check if None

House of Representatives

United States Senate

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

NOTE: To add the name of a lobbyist no longer employed by the firm, type the name into the drop down box above.

Name	Covered Official Position (if applicable)
Gilliland, C. Michael	
Porter, John Edward	
Smith, Kate McAuliffe	
Warnke, Christine M.	

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature _____ Date February 9, 200

Printed Name and Title Gilliland, C. Michael (Partner)

Form LD-2 (Rev.6/98)

Page

Registrant Name Hogan & Hartson L.L.P. Client Name Iomai Corporation

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

20. Client new address

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

City

State/

Zip:

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

ISSUE UPDATE

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

BUD

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or co
		City: State: Zip: Country:

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

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
		City: Country:	

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant affiliated organization

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Signature _____ Date FEBRUARY 9, 200

Printed Name and Title Gilliland, C. Michael (Partner)

Form LD-2 (Rev. 6/98)

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