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| Clerk of the House of Representatives<br>Legislative Resource Center<br>135 Cannon Building<br>Washington, DC 20515<br><a href="http://lobbyingdisclosure.house.gov">http://lobbyingdisclosure.house.gov</a> | Secretary of the Senate<br>Office of Public Records<br>232 Hart Building<br>Washington, DC 20510<br><a href="http://www.senate.gov/lobby">http://www.senate.gov/lobby</a> |
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# LOBBYING REPORT

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/Lobbying Firm <input type="checkbox"/> Self Employed Individual<br><u>Invariant LLC</u>          |  |
| <b>2. Address</b><br>Address1 <u>901 7th Street NW</u> Address2 <u>Suite 600</u><br>City <u>Washington</u> State <u>DC</u> Zip Code <u>20001</u> Country <u>USA</u>         |  |
| <b>3. Principal place of business (if different than line 2)</b><br>City _____ State _____ Zip Code _____ Country _____   |  |
| <b>4a. Contact Name</b><br>Ms. <u>LAURA JOSHUA</u>  | <b>b. Telephone Number</b> <u>2026288952</u> |
| <b>c. E-mail</b> <u>joshua@invariantgr.com</u>  |  |
| <b>5. Senate ID#</b><br><u>314237-1006792</u>   |  |
| <b>7. Client Name</b> <input type="checkbox"/> Self <input type="checkbox"/> Check if client is a state or local government or instrumentality<br><u>Oto Analytics, Inc</u> | <b>6. House ID#</b><br><u>391450210</u>      |

**TYPE OF REPORT** 8. Year 2022 Q1 (1/1 - 3/31)  Q2 (4/1 - 6/30)  Q3 (7/1 - 9/30)  Q4 (10/1 - 12/31)

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

10. Check if this is a Termination Report  Termination Date 12/31/2022 11. No Lobbying Issue Activity

| INCOME OR EXPENSES - YOU MUST complete either Line 12 or Line 13  |  |
|---|--|
| <p align="center"><b>12. Lobbying</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$5,000 <input type="checkbox"/></p> <p>\$5,000 or more <input checked="" type="checkbox"/> \$ <u>120,000.00</u></p> <p>Provide a good faith estimate, rounded to the nearest \$10,000, of all lobbying related income for the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p> | <p align="center"><b>13. Organizations</b></p> <p>EXPENSE relating to lobbying activities for this reporting period were:</p> <p>Less than \$5,000 <input type="checkbox"/></p> <p>\$5,000 or more <input type="checkbox"/> \$ _____</p> <p><b>14. REPORTING</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code</p> |

Signature Digitally Signed By: Laura Joshua Date 1/20/2023 9:32:45 AM

**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. Add additional page(s) as needed.

15. General issue area code SMB

16. Specific lobbying issues

Monitor proposals on Paycheck Protection Program (PPP) related issues.

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

U.S. SENATE, U.S. HOUSE OF REPRESENTATIVES, Small Business Administration (SBA)

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

| First Name | Last Name | Suffix | Covered Official Position (if applicable) | New                      |
|------------|-----------|--------|---|--------------------------|
| Carolyn    | Coda      |        |   | <input type="checkbox"/> |
| Quincy     | Enoch     |        |   | <input type="checkbox"/> |
| Joseph     | Smith     |        |   | <input type="checkbox"/> |
| Matt       | Russell   |        |   | <input type="checkbox"/> |

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

**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. Add additional page(s) as needed.

15. General issue area code TAX

16. Specific lobbying issues

Monitor tax provisions in P.L.117-169, Inflation Reduction Act of 2022.

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

U.S. SENATE, U.S. HOUSE OF REPRESENTATIVES

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

| First Name | Last Name | Suffix | Covered Official Position (if applicable) | New                      |
|------------|-----------|--------|---|--------------------------|
| Carolyn    | Coda      |        |   | <input type="checkbox"/> |

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

**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 | Suffix |
|------------|-----------|--------|------------|-----------|--------|
| <b>1</b>   |           |        | <b>3</b>   |           |        |
| <b>2</b>   |           |        | <b>4</b>   |           |        |

**ISSUE UPDATE**

24. General lobbying issue that no longer pertains

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Internet Address:

| Name | Address        |      |                |     | Principal Place of Business<br>(city and state or country) |      |       |         |
|------|----------------|------|----------------|-----|--|------|-------|---------|
|      | Street Address | City | State/Province | Zip | Country  | City | State | Country |
|      |                |      |                |     |  |      |       |         |

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

1

2

3

## FOREIGN ENTITIES

27. Add the following foreign entities:

| Name | Address        |      |                | Principal place of business<br>(city and state or country) | Amount of contribution for<br>lobbying activities | Ownership<br>percentage in<br>client |
|------|----------------|------|----------------|--|---|--------------------------------------|
|      | Street Address | City | State/Province |  |   |                                      |
|      |                |      |                | City<br>State  |   | %                                    |

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

1

3

5

2

4

6

## CONVICTIONS DISCLOSURE

29. Have any of the lobbyists listed on this report been convicted in a Federal or State Court of an offense involving bribery, extortion, embezzlement, an illegal kickback, tax evasion, fraud, a conflict of interest, making a false statement, perjury, or money laundering?

No  Yes

| Lobbyist Name | Description of Offense(s) |
|---------------|---------------------------|
|               |                           |