

SECRETARY

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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		Ropes & Gray LLP	
2. Address <input type="checkbox"/> Check if different than previously reported			
Address1 One Metro Center, 700 12th St. NW, Suite 900			
City	Washington	State	DC
Zip Code	20005	Country	USA
3. Principal place of business (if different than line 2)			
City		State	
Zip Code		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Thomas M. Susman	(202) 508-4620	Thomas.susman@ropesgray.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Bristol-Myers Squibb Co.			33682-238
			6. House ID #
			30720015

**TYPE OF REPORT** 8. Year 2005 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 \_\_\_\_\_ 11. No Lobbying Activity ☐

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

<p><b>12. Lobbying Firms</b></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"/> ⇨ \$ _____</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><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of option</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 Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Revenue Code</p>
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Form Co

Printed Name and Title Thomas M. Susman, Partner

0000111350



Client Name Bristol-Myers Squibb Co.

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			

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

Find the code to select below.

25. Add the following affiliated organization(s)

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

**27. Add the following foreign entities**

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

Add a page for more uoc

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