Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center 9-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF THE SEMANS 99 AUG 16 PM 3:43

LOBBYING REPORT

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

1. Registrant Name GLAXO WELLCOME, INC.			
2. Address Check if different than previously reported			
1500 K Street, N.W. Suite 650		***************************************	
3. Principal Place of Business (if different from line 2) City: Washington, DC State/2	Sip (or Country)		
4. Contact Name Telephone Janie A., Kinney (202) 715-1000	E-mail (optional)	5. Senate ID# 16293-12	
7. Client Name 🗵 Self	144944441, 14394941, 155949414444444444444444444444444444444	6. House ID# 31461000	
0. Check if this is a Termination Report □ Termination INCOME OR EXPENSES - Complete Either		11. No Lobbying Activity	
12. Lobbying Firms	13. Organiza	ations	
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying acti period were:		
Less than \$10,000 ***	Less than \$10,000 🚨		
\$10,000 or more. □ ⇒ \$	\$10,000 or more \$\begin{align*} \Phi & \sqrt{1,539,116} \end{align*}		
\$10,000 or more \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.		
of all lobbying related income from the client (including all	Method A. Reporting amounts using LDA definitions only		
payments to the registrant by any other entity for lobbying activities on behalf of the client).	Method B. Reporting amounts under section 6033(b)(8)of the Internal Revenue Code		
<u> </u>	Method C. Reporting amounts t internal Revenue Co		
Signature Dara Mush		444	
Printed Name and Title Sarah J. Walsh, Director,	Pederal Government Relatio	ms	
LD-2 (REV. 6/98)	•	PAGE 1 of 🥇	

Registrant Name GLAXO WELLCOME Cli	ent Name_SELE
LOBBYING ACTIVITY, Select as many codes as no engaged in lobbying on behalf of the client during the information as requested. Attach additional page(s) as	ecessary to reflect the general issue areas in which the registrant reporting period. Using a separate page for each code, provide needed.
15. General issue area code CPT (one per pa	egc)
16. Specific lobbying issues H.R. 1907; American Inventors Protec H.R. 434; Africa Growth & Opportuni S. 666; Africa Growth & Opportuni	ty Act
17. House(s) of Congress and Federal agencies contact US House of Representatives US Senate	cted Check if None
18. Name of each individual who acted as a lobbyist	1
Name Janie Kinney	Covered Official Position (if applicable) Nev
Sarah J. Walsh	a
•	<u> </u>
	·
	Q.
19. Interest of each foreign entity in the specific issues list	ed on line 16 above Check if None
Signature and Title Sarah J. Walsh, Direct	Date Cuigus 13, 1999 tor, Federal Government Relations

Form FD-7 (Rev 6/98)	2 ° 1 7

Registrant Name	GLAXO WELLCOME	Client Name	SELF	
engaged in lobbyi		ring the reporting period	or the general issue areas in which the registre. Using a separate page for each code, prov	
15. General issue	area code <u>HCR</u> (o	ne per page)		
S. 881; M H.R. 1057, H.R. 2470; H.R. 1941; H.R. 216:	ealth Care Personal I Medical Information Pr S. 573; Medical Inf	otection Act of 19 ormation Privacy & Protection and Re- Privacy Act- re Act	9	
17. House(s) of (Congress and Federal agenci	es contacted	Check if None	
US House o US Senate	f Representatives			
18. Name of eac	h individual who acted as a l	lobbyist in this issue area		
	Name		Covered Official Position (if applicable)	Nev
Janie Kinn	ev			Nev
Sara Froel	ich		Covered Official Position (if applicable)	
Sara Froel	ich huyler			o
Sara Froel	ich huyler			0
Sara Froel William Sc Sarah J. W	ich huyler			0
Sara Froel William Sc Sarah J. W	ich huyler			0 0
Sara Froel William Sc Sarah J. W	ich huyler			
Sara Froel William Sc Sarah J. W	ich huyler			
Sara Froel William Sc Sarah J. W	ich huyler			
Sara Froel William Sc Sarah J. W	ich chuyler falsh ch foreign entity in the specific	issues listed on line 16 about		

Registrant Name	GLAXO WELLCOME	Client Name	SELF	
engaged in lobb information as	bying on behalf of the client requested. Attach additiona	during the reporting p	reflect the general issue areas in which the re criod. Using a separate page for each code,	
General iss	sue area code MED	(one per page)		
16. Specific to	bbying issues			
S. 805; To	o limit authority of provide asthma treat For increased fundin	ment services for	children	
17. House(s) o	of Congress and Federal age:	ncies contacted	☐ Check if None	
US House of US Senate	Representatives			
18. Name of e	ach individual who acted as	a lobbyist in this issue	area	
	Name	1	Covered Official Position (if applicable)	Nev
Janie Kinne	у			
Sara Froeli	ch		,,,,,,,,,,,,,	n
William Sch	wyler			0
Sarah J. Wa	1 - L			Ìq
				۵
7.1.1.7.7.7.7.7.7.7.7.1.7.7.1.7.7.1.7.7.1.7				۵
***************************************	***************************************			a
				0
19. Interest of	each foreign entity in the speci-	fic issues listed on line 10	above Check if None	
Signature	Sa at S	ash	Date august 13	3 <i>19G G</i>
	and Title Sarah J. Walsh	, Director, Feder	al Government Relations	The state of the s
Frant D.7 (Rev 6				
· (mark t 1347 MPV P			4 مددط	n* 7

Registrant Name GLAXO WELLCOME Client 1	Name_SELF
	sary to reflect the general issue areas in which the registrant rting period. Using a separate page for each code, provide ded.
5. General issue area code MMM (one per page)	
i.6. Specific lobbying issues	
H.R. 664; S.73l; Prescription Drug Fairness Medicare Drug Benefit Proposals	
H.R. 1090; The Medicare Full Access to Cand	er Treatment Act
17. House(s) of Congress and Federal agencies contacted USCHouse of Representatives US Senate	Check if None
	•
18. Name of each individual who acted as a lobbyist in th	is issue area
Name	Covered Official Position (if applicable) New
Janie Kinney	
Sara Froelich	
William Schoyler	<u> </u>
Sarah J. Walsh	0
·	<u> </u>
	·
	O
19. Interest of each foreign entity in the specific issues listed or	a line 16 above Check if None
Signature an an over	Date august 13/999
Printed Name and Title Sarah J. Walsh, Directore	
Finned Name and the	
Facm (11-2 (Rev 6/98)	from 5 N° 7

Registrant Name	GLAXO WELLCOME	Client Name	SELF	
engaged in lobby	ring on behalf of the client d equested. Attach additional	uring the reporting po	reflect the general issue areas in which the registrant criod. Using a separate page for each code, provide	
15. General issu	e area code (e	one per page)	·	
	bying issues . 835; To extend the l Broad Tax Changes	R&D)tax\credit=		
	Congress and Federal agenc	sies contacted	Check if None	
US Senate	Representatives			
18. Name of each	ch individual who acted as a	lobbyist in this issue	arca	
	Name	1	Covered Official Position (if applicable)	Nev
Janie Kinne	X			
Sara Froeli	ċħ			
William Sch	uyler			۵
Sarah J. Wa			1	□
				O
	***************************************			a
		1-4-5-41 -1444	117711-1771-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
19. Interest of ea	ch foreign entity in the specific	: issues listed on line 16	above Check if None	1
		_ ^		
Signature	- The state of the	Just	Date August 13, 19	99
Printed Name an	d Title Sarah J. Wals	sh, Director, Pe	deral Coverament Relations	,,
Form 1 D-2 (Rev 6/9)	91		Page 6 of	7

egistrant Name_	GLAXO WELLCO	fE Client I	NameSELF			
nformation	Update Page - C	emplete ONLY where re	egistration information	has changed.		
28. Cliens new addr	£65		······································		**	
	ripal place of business (if-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		
City			(or Country)			
	acription of client's busin				1455517751 1777-1717751777-1-	
				. ,		
		d individual who is no los	iger expected to act as a	lobbyist for the client		
J. Andrew	MAT COLLUT	-				
		·····				
ISSUE UPDA 24. General lob		sly reported that no longe	r pertain			
	ORGANIZATIÓ	-				
Name		1	Address	1	Principal Place of Business (city and state or country)	
26. Name of ea	sch previously report	ed organization that is no	longer affiliated with the	registrant or client		
		Ü		·		
FOREIGN EN	TITTES					
27. Add the fol Nam	lowing foreign entitie	Address	Principal place of busin (city and state or count		Ownership percentage in elient	
	,,			,		
]_	
		ed foreign entity that no lo	onger owns, or controls,	or is affiliated with the regist	rant, client or	
Dotainits	organization	on/				
Signature	Ju a	e-X Valx	<i></i>	Date august	13 199	
-	nd Title Sarah J.	Walsh, Director,	Pederal Governmen	- //		
Jones I D.7 /Rev. 6		202200		p _{ao}	r 7 of 7	