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LOBBYING REPORT

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

1. Registrant Name GlaxoSmithKline			
2. Address <input type="checkbox"/> Check if different than previously reported 1500 K Street, NW Suite 650			
3. Principal Place of Business (if different from line 2) City: Washington, DC State/Zip (or Country) 20005			
4. Contact Name Janie A. Kinney		Telephone 202-715-1000	5. Senate ID# 16293-12
7. Client Name <input checked="" type="checkbox"/> Self		6. House ID# 31461000	

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) 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

12. Lobbying Firms	13. Organization
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>2,000,000.00</u> Expenses (nearest \$20,000)
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).	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of option <input checked="" type="checkbox"/> Method A. Reporting amounts used LDA definitions <input type="checkbox"/> Method B. Reporting amounts under section 6033(b) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature

Date

10 August

Printed Name and Title

Sarah J. Walsh, Vice President, Federal Government Relations Tax and Pharmaceuticals



Registrant Name GlaxoSmithKline Client Name Self

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

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

16. Specific lobbying issues

HR 2795 Patent Reform Act of 2005- infringement and continuation provisions.

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

U.S. House of Representatives
U.S. Senate
U.S. PTO

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

Name	Covered Official Position (if applicable)
Janie A. Kinney	
Sarah J. Walsh	
Patrick McLain	
William Schuyler	
Elizabeth York	
Kimberly A. Williams	
Philip Thevenet	

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

Signature _____ Date _____

Printed Name and Title

66082000

Registrant Name GlaxoSmithKline Client Name Self

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

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

16. Specific lobbying issues

- H.R. 881 Mercury-free Vaccines Act of 2005
- S. 1051 HIV & AIDS Research CARE ACT of 2005
- S. 975 Project BioShield II Act of 2005 – IP Provisions
- S.375 Flu Protection Act of 2005
- S. 470 Fair Access to Clinical Trials Act of 2005
- H.R. 3196 Fair Access to Clinical Trials Act of 2005

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

- U. S. House of Representatives
- U. S. Senate
- Federal Trade Commission
- Food & Drug Administration
- National Institutes of Health
- U.S. State Department
- Office of National AIDS Policy
- Health & Human Services

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

Name	Covered Official Position (if applicable)
Janie A. Kinney	
Sarah J. Walsh	
Patrick McLain	
William Schuyler	
Elizabeth York	
Kimberly A. Williams	
Philip Thevenet	

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

Signature _____ Date _____

Printed Name and Title _____

0000381000



Registrant Name GlaxoSmithKline Client Name Self

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 MMM (one per page)

16. Specific lobbying issue

- S. 873 Medicare Prescription Drug Savings & Choice Act of 2005
- S. 345 Medicare Prescription Drug Savings & Choice Act 2005
- H.R. 729 Medicare Drug Cost Credibility Act of 2005
- H.R. 1626 Medicare Prescription Drug Improvement Act of 2005
- H.R. 712 Medicare Prescription Drug Sensibility Act

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

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Janie A. Kinney	
Sarah J. Walsh	
Patrick McLain	
William Schuyler	
Elizabeth York	
Kimberly A. Williams	
Philip Thevenet	

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

Signature _____ Date _____

Printed Name and Title _____

1001850000

Registrant Name GlaxoSmithKline Client Name Self

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

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

16. Specific lobbying issues

- H.R. 3010 Labor, HHS Appropriations Act of 2006 – provisions: treatment of HIV
- H.R. 578 Prescription Drug Affordability Act
- H.R. 328 Pharmaceutical Market Access Act of 2005
- S. 109 Pharmaceutical Market Access Act of 2005
- S. 334 Pharmaceutical Market Access & Drug Safety Act of 2005
- H.R. 700 Pharmaceutical Market Access & Drug Safety Act of 2005
- H.R. 563 Prescription Drug Affordability Act of 2005
- H.R. 516 Class Action Fairness Act 2005
- S. 5 Class Action Fairness Act of 2005
- H.R. 2744 Agriculture Appropriations for 2006 –provisions re: drug importation
Issues pertaining to metered-dose inhalers –adherence to Montreal Protocol and supply of CFCs

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

U.S. House of Representatives
U.S. Senate
Health & Human Services

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

Name	Covered Official Position (if applicable)
Janie A. Kinney	
Sarah J. Walsh	
Patrick McLain	
William Schuyler	
Elizabeth York	
Kimberly A. Williams	
Philip Thevenet	

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

Signature _____ Date _____

Printed Name and Title _____

000381002

Registrant Name GlaxoSmithKline Client Name Self

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

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

16. Specific lobbying issues

H.R. 575 Say No to Drug Ads Act

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

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
Janie Kinney	
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William Schuyler	
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Kimberly A. Williams	
Philip Thevenet	

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

Signature _____ Date _____
Printed Name and Title _____

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