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Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
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LOBBYING REPORT

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

1. Registrant Name Fabiani & Company, LLC			
2. Address <input type="checkbox"/> Check if different than previously reported 1101 Pennsylvania Avenue, NW Suite 700			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20004			
4. Contact Name Scott Thompson	Telephone (202) 756-4538	E-mail (optional) sthompson@fabiani-co.com	5. Senate ID # 72576-
7. Client Name <input type="checkbox"/> Self Alnylam Pharmaceuticals			6. House ID # 35932

TYPE OF REPORT 8. Year 2004 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 **INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

<p align="center">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 checked="" type="checkbox"/> ⇒ \$ <u>40,000.00</u> 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 align="center">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 reporting accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions</p> <p><input checked="" type="checkbox"/> Method B. Reporting amounts under section 6033 of Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code</p>
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Signature 

Printed Name and Title

Scott A. Thompson, CPA - CFO

LD-2 (REV. 6/98)

PA

Registrant Name Fabiani & Company, LLC Client Name Alynlam Pharmaceuticals

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the re 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

R&D Dollars to support research

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

Name	Covered Official Position (if applicable)
James P. Fabiani	

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

Signature *[Handwritten Signature]* Date 6/15/05

Registrant Name Fabiani & Company, LLC Client Name Alynham Pharmaceuticals

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

R&D Dollars to support research

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

Name	Covered Official Position (if applicable)
James P. Fabiani	

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

Signature *[Handwritten Signature]* Date 6/15/05

Registrant Name Fabiani & Company, LLC Client Name Alnylam Pharmaceuticals

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, information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

R&D Dollars to support research

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

Name	Covered Official Position (if applicable)
James P. Fabiani	

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

Signature  Date 6/15/05

Registrant Name Fabiani & Company, LLC Client Name Anylam Pharmaceuticals

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 (or 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

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Busin (city and state or coun

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	O p t i o n a l

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

Signature



Date

6/15/05

Signature _____ Date _____

Printed Name and Title Scott A. Thompson, CPA - CFO

Form LD-2 (Rev. 6/98)

Page _____