

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

Secretary of the Senate
 Office of Public Records
 552 Hart Building
 Washington, DC 20510

SECRETARY OF THE SENATE
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 H.D.

LOBBYING REPORT

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

1. Registrant Name: DuPont Pharmaceuticals

2. Address: Check if different than previously reported
1011 Bryan Pond Court, McLean, VA 22102

3. Principal Place of Business (if different from line 2)
 City: Wilmington State/Zip for Country: DE 19805

4. Contact Name: Lynne O'Brien Telephone: 703-757-7589 E-mail (optional): lynne.obrien@dupontpharma.com

5. Senate ID #: 12824-12

7. Client Name: Self

6. House ID #: 31849000

TYPE OF REPORT 3. Year: 1999 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 (2 OR Line 3)

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Income (maximum \$20,000)</small></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>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 checked="" type="checkbox"/> ⇒ \$ <u>200,000</u> <small>Expenses (maximum \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LIDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(c) of the Internal Revenue Code</p>
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Signature: Lynne O'Brien

Printed Name and Title: Director, Federal Government Affairs

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Registrant Name: DuPont Pharmaceuticals
Client Name: _____

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. Attach additional page(s) as needed.

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

16. Specific lobbying issues
Reform FDA standards for certain classes of drugs
Medicare drug benefit

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

House
Senate

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

Name	Covered Office Position (if applicable)

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

Signature: [Signature] Date: 8/15/99
Printed Name and Title: Director, Federal Government Affairs

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Registrant Name DuPont Pharmaceuticals Client Name _____

Information Update Page - Complete ONLY where registration information has changed.

20. Current new address:
1011 Bryan Road Court, McLean, VA 22102

21. Current 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 Business (city and state or country)

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 (or lobbying activities)	Ownership percentage in client

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

Signature: Lynne O'Brien Date: 8/15/99
Printed Name and Title: Lynne O'Brien, Director, Federal Government Affairs
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