

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jonathan Haug

Signature of Treasurer Jonathan Haug [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		825165.44
(b) Cash on Hand at Beginning of Reporting Period.....	825165.44	
(c) Total Receipts (from Line 19) .....	83477.87	83477.87
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	908643.31	908643.31
7. Total Disbursements (from Line 31).....	1200.00	1200.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	907443.31	907443.31
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y Y 01 / 31 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7912.82	7912.82
(ii) Unitemized .....	75505.35	75505.35
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	83418.17	83418.17
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	83418.17	83418.17
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	59.70	59.70
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	83477.87	83477.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	83477.87	83477.87

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	1200.00	1200.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1200.00	1200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1200.00	1200.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	83418.17	83418.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	83418.17	83418.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

**A. Mr Derica W Rice**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Exec VP-Global Services and CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2015  
**Transaction ID : PR1550150637120**

Amount of Each Receipt this Period 250.00

P/R Deduction (\$250.00 Monthly)

**B. Alex M Azar**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation President-Lilly USA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2015  
**Transaction ID : PR2203182837120**

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**C. MARIA CROWE**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation President-Manufacturing Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2015  
**Transaction ID : PR2229728337120**

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 1082.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Barton R Peterson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2015 <b>Transaction ID : PR2405181837120</b>
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Eli Lilly and Company	Occupation Sr VP-Corporate Affairs/Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	
		P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial) <b>B. David A Ricks</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2015 <b>Transaction ID : PR2430399937120</b>
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Eli Lilly and Company	Occupation Sr VP and Pres-Lilly Bio-Medicines	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	
		P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial) <b>C. Daniel Skovronsky</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2015 <b>Transaction ID : PR2597749137120</b>
Mailing Address 201 Highland Lane		Amount of Each Receipt this Period 364.80
City Bryn Mawr	State PA	Zip Code 19010-3708
FEC ID number of contributing federal political committee.	C	
Name of Employer Eli Lilly and Company	Occupation Sr VP-Clinical and Product Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 364.80	
		P/R Deduction (\$364.80 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1196.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

**A. Mr John B Quirk**  
Full Name (Last, First, Middle Initial)

Mailing Address 1815 Horseback Trail

City Vienna State VA Zip Code 22182-1813

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Sr Director-State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : PR371877137120**

Amount of Each Receipt this Period  
 207.12

P/R Deduction (\$207.12 Monthly)

**B. Mr Joseph B Kelley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1817 Horseback Trail

City Vienna State VA Zip Code 22182-1813

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation VP-Global Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : PR371907537120**

Amount of Each Receipt this Period  
 416.00

P/R Deduction (\$416.00 Monthly)

**C. Mr Jeffrey N Simmons**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Sr VP and Pres-Elanco Animal Health

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : PR372048737120**

Amount of Each Receipt this Period  
 416.00

P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1039.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

**A. Mr Thomas W Grein**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Sr Vice President-Finance-Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : PR372069237120**

Amount of Each Receipt this Period  
 224.36

P/R Deduction (\$224.36 Monthly)

**B. Dr Andrew M Dahlem**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Vice President-LRL Operations/LRL Euro

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 371.42

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : PR372409537120**

Amount of Each Receipt this Period  
 371.42

P/R Deduction (\$371.42 Monthly)

**C. Mr Enrique A Conterno**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Sr VP and Pres-Lilly Diabetes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2015  
**Transaction ID : PR372480237120**

Amount of Each Receipt this Period  
 416.00

P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1011.78

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr Newton F Crenshaw</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2015 <b>Transaction ID : PR372601437120</b>
Mailing Address Lilly Corporate Center			Amount of Each Receipt this Period 368.98
City Indianapolis	State IN	Zip Code 46285-0001	P/R Deduction (\$368.98 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation VP-Onc-US/CA Bus Unit Glbl Bus Dev/Ad		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 368.98	

Full Name (Last, First, Middle Initial) <b>B. Mr Stephen F Fry</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2015 <b>Transaction ID : PR372626437120</b>
Mailing Address Lilly Corporate Center			Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285-0001	P/R Deduction (\$416.00 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Sr VP-Human Resources and Diversity		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.00	

Full Name (Last, First, Middle Initial) <b>C. Dr Paul Ahern</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2015 <b>Transaction ID : PR373578737120</b>
Mailing Address Lilly Corporate Center			Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285-0001	P/R Deduction (\$416.00 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Sr VP-Global IAPI&Dry Prod MFG/Cont Im		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Dr Susan Mahony</b>		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2015 <b>Transaction ID : PR373922737120</b>
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Eli Lilly and Company	Occupation Sr VP and Pres-Lilly Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	
		P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial) <b>B. Mr DAVID Thomas NOESGES</b>		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2015 <b>Transaction ID : PR374108737120</b>
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 239.02
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Eli Lilly and Company	Occupation VP-Sales-US Diabetes	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.02	
		P/R Deduction (\$239.02 Monthly)

Full Name (Last, First, Middle Initial) <b>C. Mr Michael J Harrington</b>		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2015 <b>Transaction ID : PR374178637120</b>
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Eli Lilly and Company	Occupation Sr Vice President-General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	
		P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1071.02
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

**A. Mr Aaron L Schacht**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation GBD Leader-Pain  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.78

Date of Receipt 01 / 31 / 2015  
**Transaction ID : PR374184137120**  
 Amount of Each Receipt this Period 210.78  
 P/R Deduction (\$210.78 Monthly)

**B. Dr Thomas F Bumol**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8255 Caminito Maritimo  
 City La Jolla State CA Zip Code 92037-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation SVP-Biotech Discovery Res/Pres-AME-LRL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.64

Date of Receipt 01 / 31 / 2015  
**Transaction ID : PR374359037120**  
 Amount of Each Receipt this Period 202.64  
 P/R Deduction (\$202.64 Monthly)

**C. Dr William C Weldon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Vice Pres-Elanco Research & Developmen  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 01 / 31 / 2015  
**Transaction ID : PR374378637120**  
 Amount of Each Receipt this Period 220.00  
 P/R Deduction (\$220.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 633.42  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

**A. Dr John C Lechleiter**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Chairman of the Board/Pres/CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.00**

Date of Receipt **01 / 31 / 2015**

**Transaction ID : PR374440637120**

Amount of Each Receipt this Period **416.00**

P/R Deduction (\$416.00 Monthly)

**B. Mr John E Bonitt**  
Full Name (Last, First, Middle Initial)

Mailing Address 1200 Villamay Boulevard

City Alexandria State VA Zip Code 22307-2048

FEC ID number of contributing federal political committee. **C**

Name of Employer Eli Lilly and Company Occupation Exec Dir-Federal Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **261.70**

Date of Receipt **01 / 31 / 2015**

**Transaction ID : PR375033537120**

Amount of Each Receipt this Period **261.70**

P/R Deduction (\$261.70 Monthly)

**C.**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>677.70</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>7912.82</b>

