

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Bristol-Myers Squibb Co. Employee Political Advocacy Fund for Innovation

ADDRESS (number and street) 777 Scudders Mill Road

(Check if address is changed)

Plainsboro NJ 08536
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) christian.daniels@bms.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) n/a

2. DATE 09 / 04 / 2015

3. FEC IDENTIFICATION NUMBER ▶ C C00035675

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

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

Type or Print Name of Treasurer Christian Daniels

Signature of Treasurer Christian Daniels [Electronically Filed] Date 09 / 04 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.