FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZAT	ION		
i Oitim i	(See instructions)			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Takeda Pharm	aceuticals America, Inc. Political Ac	tion Committee (TakPA	-	
ADDRESS (number and s	treet) One Takeda Parkway			
(Check if address				
is changed)	Deerfield			60015 -
	CIT	'Y ▲	STATE	ZIP CODE 🛦
COMMITTEE'S E-MAI	_ ADDRESS (Please provide only one e-mail	address)		
(Check if address is changed)	awilkinson@tpna.com			
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0 3	/ D D / Y Y Y Y Y Y Y 2009		1	
3. FEC IDENTIFICAT	TION NUMBER C	C00441733		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my knowledg	ge and belief it is true, correct and	d complete	
	Freeslirer Helen Evans			
Type or Print Name of	reasurer			
Signature of Treasurer	Electronically Filed by Helen Evans		Date 03	26 2009
NOTE: Submission of fals	se, erroneous, or incomplete information may sub			
Office Use Only		For further information c Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE (Check One) ommittee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information	below.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
	Name Candi			
	Candi Party	date Affiliatio	Office Sought: House Senate	President State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee	tee.
	Name Candi			
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
_	Politic	cal Act	ion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
			X Corporation Corporation w/o Capital Stock	Labor Organization
			H H	
			Membership Organization Trade Association	Cooperative
	(f)		X In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)	Ш	This committee supports/opposes more than one Federal candidate, and is NOT a separa committee. (i.e., nonconnected committee)	ate segregated fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
_			In addition, this committee is a Leadership i Ao. (identity sponsor on line o.)	
	Joint F	undra	ising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, at least one of which is an authorized committee of a federal care	
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate	
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	С
			2. FEC ID number	С
			3. FEC ID number	
			4 FEC ID number	>

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Write	e or Type Committee Name					
1	Takeda Pharmaceuticals	America, Inc. Political Action	on Committee (TakPAC)			
6. N	lame of Any Connected Org	anization, Affiliated Committee, J	oint Fundraising Representati	ve, or Leader	ship PAC Sponsor	
Ta	akeda Pharmaceuticals	America Inc.				
ı	1 1 1 1 1 1 1 1 1		<u> </u>			
M	failing Address	One Takeda Park	(way			
		Deerfield	_	L L	60015	
		CITY▲	ST	ATE 🛕	ZIP CODE 🛦	
R	Relationship:					
X	7	Affiliated Committee	Joint Fundraising Represe	ntative	Leadership PAC Spor	nsor
	custodian of Records: Ide	ntify by name, address, (phone books and records.	number optional), and po	osition of the	e person in	
F	ull Name	ivans		1 1 1 1 1		1 1
	Mailing Address	One Takeda Park	kway			
		Deerfield		ıL	60015 _	
т	itle or Position ♥	CITY A	ет	ATE&	ZIP CODE A	
ı	Treasurer	CITT AL	Telephone number	224	_	218
			, coprione names			
		and address (phone number designated agent (e.g., assista		the committ	tee; and the	
	Full Name of Treasurer Helen E	Evans				
N	Mailing Address	One Takeda Par	kway			
		Deerfield		IL_	60015 –	
Т	Fitle or Position ♥	CITY A	ST	ATE.	ZIP CODE A	
	Treasurer		Telephone number	224	_ 554 _ 22	218
_			i elepriorie riumber			

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Full Name of Designated Agent	Scott Dessing			
Mailing Addres	One Takeda Parkway			
	Deerfield	<u>IL</u>	60015 –	
Title or Position \	CITY A	STATE A	ZIP CODE A	
	Assistant Treasurer T	Telephone number		
9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
	Bank of America			
Mailing Address	PO Box 15463			
	Wilmington	DE	19884 _ 5463	
	CITY 🗖	STATE △	ZIP CODE 🛕	
Name of Bank, [Depository, etc.			
Mailing Address				
	CITY ▲	STATE △	ZIP CODE 🛕	

Banks or Other Depositories safety deposit boxes or maintai		mmittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, etc.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
			[ADDITIONAL
	anization, Affiliated Committee, Joint Fundraising	Representative, or Leaders	ship PAC Sponsor
Millennium Pharmaceut	icals Inc. PAC		
Mailing Address	40 Landsdowne Street		
	Cambridge	MA L	02139
lationship:	CITY	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising	Representative Lead	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Mailing Address			
	_		
Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
	Te	lephone number	
laint Eundrainer Partiainant			[ADDITIONAL]
Joint Fundraiser Participant	1		
		FEC ID number	