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# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	-or Other Than An Autr	iorized Committee	Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
GlaxoSmithKline LLC I	PAC (GSK PAC)			
ADDRESS (number and street)	Five Moore Drive			
Check if different	PO Box 13358			
than previously reported. (ACC)	Research Triangle		NC 27709 - L	
2. FEC IDENTIFICATION NU	JMBER ▼ CIT	Y <b>A</b>	STATE ▲ ZIP CODE ▲	
C C00199703		THIS EPORT X (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M5 20 (M3) Jun 20 (M6	(Non-Elec Year Only	tion ()
(a) Quarterly Reports:			(Non-Elec Year Only	rtiòn ()
April 15 Quarterly Report (Q		20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31	(YE)
July 15 Quarterly Report (Q	PRE-Election	Primary (12P)	General (12G) Runoff (	(12R)
October 15 Quarterly Report (C	Report for the:	Convention (12C)	Special (12S)	
January 31 Year-End Report (Y	(E) Election	n on	in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special	(30S)
Termination Report (TER)	Election	n on	in the State of	
5. Covering Period 01		through 01	31 2012	
I certify that I have examined th	is Report and to the best of	my knowledge and belief it is t	rue, correct and complete.	
Type or Print Name of Treasure	Mark J. Santry			
Signature of Treasurer Mark	J. Santry	[Electronically Filed]	Date 02 20 2012	Y
NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Report to the penalties of 2 U.S.C. §4	137g.
Office Use Only			FEC FORM 3X Rev. 12/2004	

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

## GlaxoSmithKline LLC PAC (GSK PAC)

Report Covering the Period: From: 01 01 2012 To: 01 31 2012

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2012		71434.77
	(b) Cash on Hand at Beginning of Reporting Period	71434.77	
	(c) Total Receipts (from Line 19)	42846.65	42846.65
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	114281.42	114281.42
7.	Total Disbursements (from Line 31)	-3687.60	-3687.60
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	117969.02	117969.02
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

# GlaxoSmithKline LLC PAC (GSK PAC)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
(i) Itemized (use Schedule A)	1169.24	1169.24		
(ii) Uniternized	41677.41	41677.41		
(iii) TOTAL (add	7,072,41			
Lines 11(a)(i) and (ii)▶	42846.65	42846.65		
	0.00	0.00		
(b) Political Party Committees(c) Other Political 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)	42846.65	42846.65		
Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
	0.00	0.00		
All Loans Received	0.00	0.00		
	0.00			
Loan Repayments Received	0.00	0.00		
Offsets To Operating Expenditures				
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00		
Refunds of Contributions Made	7	7		
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
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		
(c) Total Transfers (add Tota) and To(b))	0.00	0.00		
Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	42846.65	42846.65		
	7	7		
Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	42846.65	42846.65		

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures:  (a) Allocated Federal/Non-Federal	rotal fillo I criod	Valendai Tear-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non Fodoral Shara	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	312.40	312.40		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))▶	312.40	312.40		
Transfers to Affiliated/Other Party	0.00	0.00		
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	-4000.00	-4000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
, , , , , , , , , , , , , , , , , , , ,				
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To:	7 7			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
Ē		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	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	0.00	0.00		
Other bisbursements	0.00			
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(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		
Lines so(a)(i), so(a)(ii) and so(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	-3687.60	-3687.60		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	-3687.60	-3687.60		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (11ev. 02/2005)	i age <b>3</b>			
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	42846.65	42846.65		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42846.65	42846.65		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	312.40	312.40		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	312.40	312.40		

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE	6	OF	8
(check only one)								
X	11a		11b		11c	12		
	13		14		15	16		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.

or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) GlaxoSmithKline LLC PAC (G	SK PAC)			
Full Name (Last, First, Middle Initial)  John E Bailey Jr.  Mailing Address FIVE MOORE DRIVE	Date of Receipt			
City Research Triangle Pa	State Zip Code NC 27709-0143	01 20 2012 Transaction ID : C5751173		
FEC ID number of contributing federal political committee.	C 27703 0143	Amount of Each Receipt this Period 384.62		
Name of Employer GlaxoSmithKline LLC	Occupation SVP Pub&Pvt Institutional			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 384.62	* Payroll Deduction: (Biweekly \$192.31)		
Full Name (Last, First, Middle Initial)  3. Deirdre Connelly  Mailing Address FIVE MOORE DRIVE		Date of Receipt		
City Research Triangle Pa	State         Zip Code           NC         27709-0143	01 20 2012  Transaction ID : C5751223  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	384.62		
Name of Employer GlaxoSmithKline LLC  Receipt For:  Primary General  Other (specify) ▼	Occupation President,North America Pharma  Aggregate Year-to-Date ▼  384.62	* Payroll Deduction: (Biweekly \$192.31)		
Full Name (Last, First, Middle Initial)  John F. Delgiorno  Mailing Address 5 MOORE DRIVE		Date of Receipt		
City Research Triangle Pa	State         Zip Code           NC         27709-0143	01 20 2012  Transaction ID : C5751558  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	400.00		
Name of Employer  GlaxoSmithKline LLC  Receipt For:  Primary General  Other (specify) ▼	Occupation VP,Government Relations  Aggregate Year-to-Date ▼  400.00	* Payroll Deduction: (Biweekly \$200.00)		
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1169.24		
TOTAL This Period (last page this line number	r only)	1169.24		

SCHEDULE B (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 7 OF 8				
IT —	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 27	one) 22 X 23 28a 28	24 25 26 28c 29 30b		
	ly information copied from such Reports and Statem for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full) GlaxoSmithKline LLC PAC (GSK P	AC)						
_	Full Name (Last, First, Middle Initial)				Data of Diabur	aamant		
A.	House Republican Campaign Com	mittee			Date of Disbur	sement		
	Mailing Address 161 ST ANTHONY AVE SUITE 950	)			01	18 2012		
		State MN	Zip Code 55103		Transaction	ID : D80783		
	Purpose of Disbursement Contribution to federal committee			011	Amount of Eac	ch Disbursement this Period		
	Candidate Name			Category/ Type		1000.00		
		nent For: Primary Other (spe	General ecify) ▼	71.	,	,		
_	Full Name (Last, First, Middle Initial)							
В.	McHenry for Congress				Date of Disbur			
	Mailing Address PO Box 1406				01 D	31 2012		
	Hickory	State NC	Zip Code 28603		Transaction	ID : D80868		
	Purpose of Disbursement VOID - Orig Rep'd M11 2011			011	Amount of Eac	ch Disbursement this Period		
	Candidate Name PATRICK TIMOTHY MCHENRY			Category/ Type		-5000.00		
		nent For: Primary Other (spe	<b>X</b> General					
С.	Full Name (Last, First, Middle Initial)  Republican Party of Minnesota				Date of Disbur			
	Mailing Address 525 PARK STREET SUITE 250		01 / D	18 2012				
	City State Zip Code Saint Paul MN 55103				Transaction	ID : D80782		
	Purpose of Disbursement Contribution to federal committee	011	A	.b Dish				
	Candidate Name			Category/ Type	Amount of Eac	th Disbursement this Period 1000.00		
	Senate	nent For: Primary Other (spe	General					
H	UBTOTAL of Disbursements This Page (optional)  OTAL This Period (last page this line number only).					-3000.00		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 OF 8				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only				
Any information copied from such Reports and Staten or for commercial purposes, other than using the name		d by any perso	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) GlaxoSmithKline LLC PAC (GSK P						
Full Name (Last, First, Middle Initial)  A. YODER FOR CONGRESS			Date of Disbursement			
Mailing Address PO BOX 26742			01 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City S	State Zip Code KS 66225		Transaction ID : D80867			
Purpose of Disbursement VOID - Orig Rep'd YE 2011	00223	011	Amount of Each Disbursement this Period			
Candidate Name KEVIN W YODER		Category/ Type	-1000.00			
Senate President	nent For: 2012 Primary General Other (specify)					
State: KS District: 03  Full Name (Last, First, Middle Initial)  3.	State: KS District: 03  Full Name (Last, First, Middle Initial)					
Mailing Address		M = M / D = D / Y = Y = Y				
City	State Zip Code					
Purpose of Disbursement			Amount of Each Disbursement this Peri			
Candidate Name		Category/ Type	7			
Office Sought:    House   Disbursen	nent For:  Primary General  Other (specify)					
Full Name (Last, First, Middle Initial)			Date of Disbursement			
Mailing Address	Mailing Address					
City	City State Zip Code					
Purpose of Disbursement  Candidate Name	Category/	Amount of Each Disbursement this Period				
Office Sought:    House   Disburser     Senate   President     State: District:	nent For: Primary General Other (specify)	Type				
SUBTOTAL of Disbursements This Page (optional)			-1000.00			
TOTAL This Period (last page this line number only)			-4000.00			