

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. 12FE4M5
GlaxoSmithKline LLC PAC (GSK PAC)

ADDRESS (number and street) 1050 K St NW, Ste 800
Check if different than previously reported. (ACC) Washington DC 20001

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00199703
3. IS THIS REPORT NEW OR AMENDED (A)
 NEW (N) 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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 05 / 01 / 2020 through 05 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Edge, Heather, , ,
Type or Print Name of Treasurer

Signature of Treasurer Edge, Heather, , , [Electronically Filed] Date 07 / 08 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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="2020"/>	<input type="text" value="166398.72"/>	<input type="text" value="166398.72"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="199407.84"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="24326.46"/>	<input type="text" value="123146.21"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="223734.30"/>	<input type="text" value="289544.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4076.16"/>	<input type="text" value="69886.79"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="219658.14"/>	<input type="text" value="219658.14"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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

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).....	11068.29	35546.27
(ii) Unitemized	13258.17	87599.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24326.46	123146.21
(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)	24326.46	123146.21
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.).....	0.00	0.00
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)).....▶	24326.46	123146.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	24326.46	123146.21

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	576.16	886.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	576.16	886.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	68500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	500.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	4076.16	69886.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4076.16	69886.79

DETAILED SUMMARY PAGE
of Disbursements

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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)	24326.46	123146.21
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24326.46	123146.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	576.16	886.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	576.16	886.79

**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 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Aceto, Richard, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.24

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-810
 Amount of Each Receipt this Period 31.00
 Memo Item

B. Aceto, Richard, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.24

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-134
 Amount of Each Receipt this Period 31.00
 Memo Item

C. Apruzzi, Nicholas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 184 Liberty Corner Rd
 City Warren State NJ Zip Code 07059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Privacy Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 738.96

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-747
 Amount of Each Receipt this Period 75.31
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	137.31
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 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Apruzzi, Nicholas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 184 Liberty Corner Rd
 City Warren State NJ Zip Code 07059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Privacy Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 738.96

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-72
 Amount of Each Receipt this Period 75.31
 Memo Item

B. Avans, Hope, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.84

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-342
 Amount of Each Receipt this Period 23.36
 Memo Item

C. Avans, Hope, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 228.84

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-677
 Amount of Each Receipt this Period 23.36
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 122.03
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 8 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Baldomir, Jason, A., ,		Date of Receipt MM / DD / YYYY 05 / 06 / 2020 Transaction ID : 20200513104029-370
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		Amount of Each Receipt this Period 27.88
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Acct Spec, Asthma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.04	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Baldomir, Jason, A., ,		Date of Receipt MM / DD / YYYY 05 / 21 / 2020 Transaction ID : 20200526104647-705
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		Amount of Each Receipt this Period 27.88
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Sr Acct Spec, Asthma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.04	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Benen, Sandra, E., ,		Date of Receipt MM / DD / YYYY 05 / 06 / 2020 Transaction ID : 20200513104029-855
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		Amount of Each Receipt this Period 40.96
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Director SGA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 403.30	

SUBTOTAL of Receipts This Page (optional).....	96.72
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 9 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Benen, Sandra, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 403.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-179
 Amount of Each Receipt this Period
 40.96
 Memo Item

B. Boone, Thomas, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr Respiratory Biologi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-619
 Amount of Each Receipt this Period
 36.60
 Memo Item

C. Boone, Thomas, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Mgr Respiratory Biologi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-954
 Amount of Each Receipt this Period
 36.60
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	114.16
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 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Britto, Ignatius, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 N. Arendell Avenue, P.O. BOX
 P.O. BOX 1217
 City Zebulon State NC Zip Code 27597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) S Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.08

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-613
 Amount of Each Receipt this Period 43.58
 Memo Item

B. Britto, Ignatius, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 N. Arendell Avenue, P.O. BOX
 P.O. BOX 1217
 City Zebulon State NC Zip Code 27597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) S Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.08

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-948
 Amount of Each Receipt this Period 43.58
 Memo Item

C. Brumleve, Erica, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 392.71

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-283
 Amount of Each Receipt this Period 39.95
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 127.11
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 11 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Brumleve, Erica, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.71

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-618
 Amount of Each Receipt this Period 39.95
 Memo Item

B. Calvo, Michael, Javier, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.87

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-696
 Amount of Each Receipt this Period 47.35
 Memo Item

C. Calvo, Michael, Javier, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 406.87

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-22
 Amount of Each Receipt this Period 47.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	134.65
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 12 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Campolongo, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, State Government Affa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 970.25

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-355

Amount of Each Receipt this Period 98.88

Memo Item

B. Campolongo, James, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Director, State Government Affa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 970.25

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-690

Amount of Each Receipt this Period 98.88

Memo Item

C. Cionci, Thomas, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 380.05

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-973

Amount of Each Receipt this Period 38.60

Memo Item

SUBTOTAL of Receipts This Page (optional).....	236.36
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 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Cionci, Thomas, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.05

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-297
 Amount of Each Receipt this Period 38.60
 Memo Item

B. Comiskey, Josephine, Yang, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP GM France
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.10

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-473
 Amount of Each Receipt this Period 62.71
 Memo Item

C. Comiskey, Josephine, Yang, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP GM France
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 627.10

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-808
 Amount of Each Receipt this Period 62.71
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	164.02
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 14 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Cona, Jeanne, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.07

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-377
 Amount of Each Receipt this Period 28.51
 Memo Item

B. Cona, Jeanne, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.07

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-712
 Amount of Each Receipt this Period 28.51
 Memo Item

C. Curran, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 184 Liberty Corner Rd
 City Warren State NJ Zip Code 07059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Chief Customer Officer, US & Head, Am
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-240
 Amount of Each Receipt this Period 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	119.52
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 15 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Curran, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 184 Liberty Corner Rd
 City Warren State NJ Zip Code 07059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Chief Customer Officer, US & Head, Ar
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-575
 Amount of Each Receipt this Period
 62.50
 Memo Item

B. Dale, Jennifer, Mary, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 755.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-393
 Amount of Each Receipt this Period
 76.69
 Memo Item

C. Dale, Jennifer, Mary, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 755.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-728
 Amount of Each Receipt this Period
 76.69
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	215.88
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 16 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Daniels, Jody, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 787.62

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-430
 Amount of Each Receipt this Period 80.40
 Memo Item

B. Daniels, Jody, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 787.62

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-765
 Amount of Each Receipt this Period 80.40
 Memo Item

C. Davis, Labert, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 294.74

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-563
 Amount of Each Receipt this Period 30.09
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	190.89
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 17 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Davis, Labert, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-898
 Amount of Each Receipt this Period
 30.09
 Memo Item

B. Demott, Eric, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-277
 Amount of Each Receipt this Period
 23.06
 Memo Item

C. Demott, Eric, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-612
 Amount of Each Receipt this Period
 23.06
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	76.21
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 18 OF 88
<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Dennis, Ann, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.80

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-43
 Amount of Each Receipt this Period 23.28
 Memo Item

B. Dennis, Ann, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.80

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-378
 Amount of Each Receipt this Period 23.28
 Memo Item

C. Dodd, Kristi, Rigney, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Contract Mgr, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 284.93

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-559
 Amount of Each Receipt this Period 28.99
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.55
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 19 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Dodd, Kristi, Rigney, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Contract Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.93

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-894
 Amount of Each Receipt this Period 28.99
 Memo Item

B. Dorscheid, Duane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 P.O. Box 13398
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Oncology Field Reimbursement Directc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.46

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-257
 Amount of Each Receipt this Period 44.65
 Memo Item

C. Dorscheid, Duane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 P.O. Box 13398
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Oncology Field Reimbursement Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 434.46

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-592
 Amount of Each Receipt this Period 44.65
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	118.29
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 20 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Edge, Heather, Simmons, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-334
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Edge, Heather, Simmons, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-669
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Elder, Jeffrey, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 344.75

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-386
 Amount of Each Receipt this Period 35.07
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.07
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 21 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Elder, Jeffrey, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-722
 Amount of Each Receipt this Period 35.07
 Memo Item

B. Ennis, Scott, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-192
 Amount of Each Receipt this Period 22.17
 Memo Item

C. Erickson, Scott, Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 311.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-869
 Amount of Each Receipt this Period 31.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	88.90
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 22 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Erickson, Scott, Allen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.28

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-193
 Amount of Each Receipt this Period 31.66
 Memo Item

B. Etheredge, Larry, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SDI Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.21

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-699
 Amount of Each Receipt this Period 31.67
 Memo Item

C. Etheredge, Larry, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SDI Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.21

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-25
 Amount of Each Receipt this Period 31.67
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
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 23 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Etzel, Merritt, Anne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Professional Lead Trelegy, U
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 428.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-695
 Amount of Each Receipt this Period 45.15
 Memo Item

B. Etzel, Merritt, Anne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Professional Lead Trelegy, U
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 428.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-21
 Amount of Each Receipt this Period 45.15
 Memo Item

C. Fiore, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Mgr Contract Analytics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 379.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-80
 Amount of Each Receipt this Period 38.55
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	128.85
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 24 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Fiore, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Mgr Contract Analytics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 379.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-415
 Amount of Each Receipt this Period 38.55
 Memo Item

B. Fox, Jennifer, Willis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 737.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-395
 Amount of Each Receipt this Period 83.29
 Memo Item

C. Fox, Jennifer, Willis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 737.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-730
 Amount of Each Receipt this Period 83.29
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	205.13
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 25 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Furgason, Jamie, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.82

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-363
 Amount of Each Receipt this Period 23.37
 Memo Item

B. Furgason, Jamie, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.82

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-698
 Amount of Each Receipt this Period 23.37
 Memo Item

C. Gardner, Katherine, Maeve Goff, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 754.41

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-615
 Amount of Each Receipt this Period 76.75
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 123.49
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 26 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Gardner, Katherine, Maeve Goff, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 754.41

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-950
 Amount of Each Receipt this Period 76.75
 Memo Item

B. Getz, Eileen, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.64

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-598
 Amount of Each Receipt this Period 21.80
 Memo Item

C. Gibb, Emily, Harrison, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr. Director Public Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 774.76

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-274
 Amount of Each Receipt this Period 78.96
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 177.51
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 27 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Gibb, Emily, Harrison, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. Director Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 774.76

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-609
 Amount of Each Receipt this Period 78.96
 Memo Item

B. Goldberg, Ronald, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Thought Leader Liaison
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 361.02

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-844
 Amount of Each Receipt this Period 36.48
 Memo Item

C. Goldberg, Ronald, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Thought Leader Liaison
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 361.02

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-168
 Amount of Each Receipt this Period 36.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 151.92
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 28 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Gorycki, Peter, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. DMPK Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.13

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-785
 Amount of Each Receipt this Period 41.15
 Memo Item

B. Gorycki, Peter, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr. DMPK Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.13

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-109
 Amount of Each Receipt this Period 41.15
 Memo Item

C. Graham, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Vice President Value Evidence a
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-449
 Amount of Each Receipt this Period 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	144.80
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 29 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Graham, John, , ,		Date of Receipt
Mailing Address 1250 South Collegeville Road		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Collegeville	State PA	Zip Code 19426
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20200526104647-784
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period <input type="text" value="62.50"/>
Occupation (for Individual) Senior Vice President Value Evidence a		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="625.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Graml, Paul, C., ,		Date of Receipt
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20200513104029-777
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period <input type="text" value="82.53"/>
Occupation (for Individual) Director SGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="812.63"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Graml, Paul, C., ,		Date of Receipt
Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Durham	State NC	Zip Code 27709
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 20200526104647-102
Name of Employer (for Individual) GlaxoSmiteKline LLC		Amount of Each Receipt this Period <input type="text" value="82.53"/>
Occupation (for Individual) Director SGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="812.63"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="227.56"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 30 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Harmon, Jennifer, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.37

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-396
 Amount of Each Receipt this Period 26.14
 Memo Item

B. Harmon, Jennifer, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.37

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-731
 Amount of Each Receipt this Period 26.14
 Memo Item

C. Harter, Carie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP Government Relations & Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 449.72

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-113
 Amount of Each Receipt this Period 45.91
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	98.19
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 31 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Harter, Carie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP Government Relations & Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 449.72

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-448
 Amount of Each Receipt this Period 45.91
 Memo Item

B. Hellmig, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) General Project Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 439.35

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-101
 Amount of Each Receipt this Period 44.39
 Memo Item

C. Hellmig, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) General Project Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 439.35

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-436
 Amount of Each Receipt this Period 44.39
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	134.69
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 32 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Hickox, Margaret, Grey, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.50

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-630
 Amount of Each Receipt this Period 30.97
 Memo Item

B. Hickox, Margaret, Grey, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.50

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-964
 Amount of Each Receipt this Period 30.97
 Memo Item

C. Hinojosa, Alec, Rubio, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 651.51

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-7
 Amount of Each Receipt this Period 66.95
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	128.89
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 33 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Hinojosa, Alec, Rubio, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 651.51

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-342
 Amount of Each Receipt this Period 66.95
 Memo Item

B. Hofer, Steve, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.35

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-917
 Amount of Each Receipt this Period 33.96
 Memo Item

C. Hofer, Steve, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 334.35

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-241
 Amount of Each Receipt this Period 33.96
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	134.87
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 34 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Holdaway, Cindy, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.53

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-160
 Amount of Each Receipt this Period 23.11
 Memo Item

B. Holdaway, Cindy, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.53

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-495
 Amount of Each Receipt this Period 23.11
 Memo Item

C. Holmberg, Amanda, Bartelme, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Coding & Reimbursement
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-19
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	96.22
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 35 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Holmberg, Amanda, Bartelme, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Coding & Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-354
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Houston, Laura, Karen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.61

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-573
 Amount of Each Receipt this Period 24.39
 Memo Item

C. Houston, Laura, Karen, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.61

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-908
 Amount of Each Receipt this Period 24.39
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	98.78
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 36 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Huff, Lisa, Renee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.50

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-933
 Amount of Each Receipt this Period 21.65
 Memo Item

B. Hull, John, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.25

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-451
 Amount of Each Receipt this Period 25.20
 Memo Item

C. Hull, John, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.25

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-786
 Amount of Each Receipt this Period 25.20
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	72.05
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 37 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Johnson, Lyndsey, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, USP Specialty

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.75

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-614

Amount of Each Receipt this Period 27.94

Memo Item

B. Johnson, Lyndsey, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, USP Specialty

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.75

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-949

Amount of Each Receipt this Period 27.94

Memo Item

C. Jorgensen, Julie, Tangeman, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 218.45

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-819

Amount of Each Receipt this Period 22.23

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.11

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 38 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Keiser, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Retail Channel Mana
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-821
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Keiser, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Retail Channel Mana
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-145
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Kelly, William, Francis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.11

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-1005
 Amount of Each Receipt this Period 31.55
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	81.55
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 39 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Kelly, William, Francis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vaccine Natl Acct Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.11

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-329
 Amount of Each Receipt this Period 31.55
 Memo Item

B. King, Kimberley, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.27

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-542
 Amount of Each Receipt this Period 28.21
 Memo Item

C. King, Kimberley, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 277.27

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-877
 Amount of Each Receipt this Period 28.21
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	87.97
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 40 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Kita, Charles, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director DevOps
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.40

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-490
 Amount of Each Receipt this Period 21.74
 Memo Item

B. Knupp, Richard, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.16

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-811
 Amount of Each Receipt this Period 27.45
 Memo Item

C. Knupp, Richard, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.16

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-135
 Amount of Each Receipt this Period 27.45
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	76.64
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 41 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Kowalski, Andrew, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.77

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-33
 Amount of Each Receipt this Period 23.68
 Memo Item

B. Kowalski, Andrew, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.77

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-368
 Amount of Each Receipt this Period 23.68
 Memo Item

C. Kropp, Carl, Lee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.66

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-114
 Amount of Each Receipt this Period 30.84
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	78.20
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 42 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Kropp, Carl, Lee, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, USP Specialty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.66

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-449
 Amount of Each Receipt this Period 30.84
 Memo Item

B. Laca, Gaspar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.04

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-300
 Amount of Each Receipt this Period 86.60
 Memo Item

C. Laca, Gaspar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.04

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-635
 Amount of Each Receipt this Period 86.60
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	204.04
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 43 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Laughery, Thomas, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Head, Portfolio Commercial Strategy, V
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 633.59

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-956
 Amount of Each Receipt this Period 64.57
 Memo Item

B. Laughery, Thomas, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Head, Portfolio Commercial Strategy, V
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 633.59

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-280
 Amount of Each Receipt this Period 64.57
 Memo Item

C. Lee, Russell, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.65

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-845
 Amount of Each Receipt this Period 30.38
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	159.52
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 44 OF 88
	<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	

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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Lee, Russell, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-169
 Amount of Each Receipt this Period
 30.38
 Memo Item

B. Lewis, James, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-816
 Amount of Each Receipt this Period
 62.50
 Memo Item

C. Lewis, James, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-140
 Amount of Each Receipt this Period
 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.38
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 45 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Linkous, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.95

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-212
 Amount of Each Receipt this Period 30.11
 Memo Item

B. Linkous, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.95

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-548
 Amount of Each Receipt this Period 30.11
 Memo Item

C. Lorber, Leah, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Assistant General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 897.66

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-584
 Amount of Each Receipt this Period 91.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 151.54
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 46 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Lorber, Leah, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Assistant General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 897.66

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-919
 Amount of Each Receipt this Period 91.32
 Memo Item

B. Lynch, Gwenda, Lynne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Manager Marketing, USP Specialty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.17

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-323
 Amount of Each Receipt this Period 33.81
 Memo Item

C. Lynch, Gwenda, Lynne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Manager Marketing, USP Specialty
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 331.17

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-658
 Amount of Each Receipt this Period 33.81
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	158.94
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 47 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mader, Michael, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Director, USP Specialty Educ
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 379.97

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-727
 Amount of Each Receipt this Period 38.62
 Memo Item

B. Mader, Michael, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Director, USP Specialty Educ
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 379.97

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-53
 Amount of Each Receipt this Period 38.62
 Memo Item

C. Madrazo, Paul, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 627.10

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-778
 Amount of Each Receipt this Period 62.71
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	139.95
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 48 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Madrazo, Paul, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-103
 Amount of Each Receipt this Period
 62.71
 Memo Item

B. Magee, Robert, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-82
 Amount of Each Receipt this Period
 30.13
 Memo Item

C. Magee, Robert, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 296.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-417
 Amount of Each Receipt this Period
 30.13
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	122.97
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 49 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Majors, Michele, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.78

Date of Receipt 05 / 06 / 2020

Transaction ID : 20200513104029-711

Amount of Each Receipt this Period 27.94

Memo Item

B. Majors, Michele, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Spec, ViiV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.78

Date of Receipt 05 / 21 / 2020

Transaction ID : 20200526104647-37

Amount of Each Receipt this Period 27.94

Memo Item

C. Mann, Howard, P., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 235.99

Date of Receipt 05 / 06 / 2020

Transaction ID : 20200513104029-343

Amount of Each Receipt this Period 23.97

Memo Item

SUBTOTAL of Receipts This Page (optional).....	79.85
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 50 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mann, Howard, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-678
 Amount of Each Receipt this Period
 23.97
 Memo Item

B. Mann, Margaret, Nowak, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-631
 Amount of Each Receipt this Period
 62.50
 Memo Item

C. Mann, Margaret, Nowak, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-965
 Amount of Each Receipt this Period
 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	148.97
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 51 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Marciniak, Martin, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vice President, CEVEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1045.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-658
 Amount of Each Receipt this Period
 104.51
 Memo Item

B. Marciniak, Martin, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Vice President, CEVEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1045.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-992
 Amount of Each Receipt this Period
 104.51
 Memo Item

C. Mariencheck, Joseph, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-807
 Amount of Each Receipt this Period
 21.17
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	230.19
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 52 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Martinez-Davis, Maya, Elena, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) President US Pharmaceuticals
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-681
 Amount of Each Receipt this Period 208.33
 Memo Item

B. Martinez-Davis, Maya, Elena, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) President US Pharmaceuticals
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-7
 Amount of Each Receipt this Period 208.33
 Memo Item

C. Mazeffa, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP and Head of USP Commercial Insign
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1041.70

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-671
 Amount of Each Receipt this Period 104.17
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	520.83
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 53 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mazeffa, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP and Head of USP Commercial Insignia
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1041.70**

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-1005
 Amount of Each Receipt this Period **104.17**
 Memo Item

B. McBride, Tilithia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **625.00**

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-961
 Amount of Each Receipt this Period **62.50**
 Memo Item

C. McBride, Tilithia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **625.00**

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-285
 Amount of Each Receipt this Period **62.50**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	229.17
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 54 OF 88
	<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	

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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. McDermott, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398

City Research Triangle	State NC	Zip Code 27709
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Director, Payer Channel Strategy
----------------------------------------------------------	-----------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-977

Amount of Each Receipt this Period
43.78

Memo Item

B. McDermott, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398

City Research Triangle	State NC	Zip Code 27709
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Director, Payer Channel Strategy
----------------------------------------------------------	-----------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-300

Amount of Each Receipt this Period
43.78

Memo Item

C. McGowan, Robert, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham	State NC	Zip Code 27709
----------------	-------------	-------------------

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

Name of Employer (for Individual) GlaxoSmiteKline LLC	Occupation (for Individual) Rx Account Management Natl Payer
----------------------------------------------------------	-----------------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
413.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-829

Amount of Each Receipt this Period
42.04

Memo Item

SUBTOTAL of Receipts This Page (optional).....	129.60
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 55 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. McGowan, Robert, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398

City Durham State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Natl Payer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 413.47

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-153

Amount of Each Receipt this Period 42.04

Memo Item

B. Millar, James, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398

City Research Triangle State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Policy and Payers

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 326.10

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-359

Amount of Each Receipt this Period 32.61

Memo Item

C. Millar, James, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398

City Research Triangle State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Policy and Payers

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 326.10

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-694

Amount of Each Receipt this Period 32.61

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 107.26

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 56 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Miller, Eric, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.89

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-281
 Amount of Each Receipt this Period 30.31
 Memo Item

B. Miller, Eric, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Acct Spec, ViiV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.89

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-616
 Amount of Each Receipt this Period 30.31
 Memo Item

C. Miller, Michele, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP, Field Reimbursement Managemen
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 972.91

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-712
 Amount of Each Receipt this Period 98.81
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 159.43
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 57 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Miller, Michele, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) FVP, Field Reimbursement Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **972.91**

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-38
 Amount of Each Receipt this Period **98.81**
 Memo Item

B. Mitchell, Scott, R.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Professional
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **226.14**

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-873
 Amount of Each Receipt this Period **23.16**
 Memo Item

C. Mitchell, Scott, R.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Professional
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **226.14**

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-197
 Amount of Each Receipt this Period **23.16**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.13
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 59 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Mullen, Sheri, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) SVP Specialty Business Unit, US Pharm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 627.10

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-216
 Amount of Each Receipt this Period 62.71
 Memo Item

B. Nowoswiat, Paul, Daniel, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Commerical Reporting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.52

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-779
 Amount of Each Receipt this Period 32.41
 Memo Item

C. Nowoswiat, Paul, Daniel, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Commerical Reporting
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 317.52

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-104
 Amount of Each Receipt this Period 32.41
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 127.53
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 60 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Olesen, Soren, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-898
 Amount of Each Receipt this Period 25.83
 Memo Item

B. Olesen, Soren, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-222
 Amount of Each Receipt this Period 25.83
 Memo Item

C. Oliff, Allen, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Swedeland Road
 City King of Prussia State PA Zip Code 19406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Senior Discovery Consultant & Early De
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 217.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-347
 Amount of Each Receipt this Period 21.74
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	73.40
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 61 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Paluch, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.37

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-705
 Amount of Each Receipt this Period 29.39
 Memo Item

B. Paluch, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.37

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-31
 Amount of Each Receipt this Period 29.39
 Memo Item

C. Peterson, Gregory, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 465.16

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-321
 Amount of Each Receipt this Period 47.16
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.94
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 62 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Peterson, Gregory, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt Payer Director
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 465.16

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-656
 Amount of Each Receipt this Period 47.16
 Memo Item

B. Phillips, Claire, Mimikos, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 371.29

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-162
 Amount of Each Receipt this Period 37.78
 Memo Item

C. Phillips, Claire, Mimikos, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Product/Brand Management Rx
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 371.29

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-497
 Amount of Each Receipt this Period 37.78
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	122.72
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 63 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Ponder, Gail, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.45

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-296
 Amount of Each Receipt this Period 30.77
 Memo Item

B. Ponder, Gail, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.45

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-631
 Amount of Each Receipt this Period 30.77
 Memo Item

C. Powers, John, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 417.99

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-459
 Amount of Each Receipt this Period 42.52
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	104.06
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 64 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Powers, John, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Regional Sales Dir, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 417.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-794
 Amount of Each Receipt this Period
 42.52
 Memo Item

B. Pruitt, Philip, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-787
 Amount of Each Receipt this Period
 32.28
 Memo Item

C. Pruitt, Philip, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 317.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-111
 Amount of Each Receipt this Period
 32.28
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	107.08
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 65 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Rancourt, Randy, Aime, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-797
 Amount of Each Receipt this Period
 100.81
 Memo Item

B. Rancourt, Randy, Aime, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-121
 Amount of Each Receipt this Period
 100.81
 Memo Item

C. Retzlaff Leeding, Stephanie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 248.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-910
 Amount of Each Receipt this Period
 25.23
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	226.85
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 66 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Retzlaff Leeding, Stephanie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 248.45

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-234
 Amount of Each Receipt this Period 25.23
 Memo Item

B. Roberts, Heath, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Service Lead
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 257.54

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-331
 Amount of Each Receipt this Period 26.02
 Memo Item

C. Roberts, Heath, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Service Lead
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 257.54

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-666
 Amount of Each Receipt this Period 26.02
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	77.27
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 67 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Robinson-Pugh, Gwendolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.51

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-324
 Amount of Each Receipt this Period 31.96
 Memo Item

B. Robinson-Pugh, Gwendolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Management Health Sys
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.51

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-659
 Amount of Each Receipt this Period 31.96
 Memo Item

C. Rodriguez, Andres, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 353.20

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-30
 Amount of Each Receipt this Period 35.81
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	99.73
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 68 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Rodriguez, Andres, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 353.20

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-365
 Amount of Each Receipt this Period 35.81
 Memo Item

B. Rollins, Sandra, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.51

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-181
 Amount of Each Receipt this Period 20.78
 Memo Item

C. Rombach, Greg, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 246.97

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-318
 Amount of Each Receipt this Period 25.25
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	81.84
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 69 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Rombach, Greg, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sr Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.97

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-653
 Amount of Each Receipt this Period 25.25
 Memo Item

B. Rose, Paula, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.31

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-783
 Amount of Each Receipt this Period 48.28
 Memo Item

C. Rose, Paula, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 475.31

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-108
 Amount of Each Receipt this Period 48.28
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	121.81
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:	PAGE 70 OF 88
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Runyon, Michelle, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-721
 Amount of Each Receipt this Period
 29.41
 Memo Item

B. Runyon, Michelle, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-47
 Amount of Each Receipt this Period
 29.41
 Memo Item

C. Rutherford, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acting Field Vice President, Mid-Atlan
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1041.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-233
 Amount of Each Receipt this Period
 104.17
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	162.99
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 71 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Rutherford, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acting Field Vice President, Mid-Atlan
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1041.70

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-568
 Amount of Each Receipt this Period 104.17
 Memo Item

B. Scholl, Scottie, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.50

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-875
 Amount of Each Receipt this Period 36.41
 Memo Item

C. Scholl, Scottie, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 358.50

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-199
 Amount of Each Receipt this Period 36.41
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	176.99
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:	PAGE 72 OF 88
	(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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Schuyler, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP,Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1045.10

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-1008
 Amount of Each Receipt this Period 104.51
 Memo Item

B. Schuyler, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP,Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1045.10

Date of Receipt **05 / 21 / 2020**
Transaction ID : 20200526104647-332
 Amount of Each Receipt this Period 104.51
 Memo Item

C. Singh, Sandeep, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 434.05

Date of Receipt **05 / 06 / 2020**
Transaction ID : 20200513104029-854
 Amount of Each Receipt this Period 45.05
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	254.07
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 73 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Singh, Sandeep, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-178
 Amount of Each Receipt this Period
 45.05
 Memo Item

B. Smith, Sherry, Consetta, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Manager Political Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-219
 Amount of Each Receipt this Period
 22.16
 Memo Item

C. Snyder, Cynthia, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Dir Govt Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 386.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-161
 Amount of Each Receipt this Period
 39.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	106.51
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 74 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Snyder, Cynthia, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Acct Dir Govt Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.28

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-496
 Amount of Each Receipt this Period 39.30
 Memo Item

B. Steele, Casey, Lewis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 362.13

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-124
 Amount of Each Receipt this Period 36.84
 Memo Item

C. Steele, Casey, Lewis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 362.13

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-459
 Amount of Each Receipt this Period 36.84
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	112.98
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 75 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Sullivan, Shawn, Leonard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Business Operations Team
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-888
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Sullivan, Shawn, Leonard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 South Collegeville Road
 City Collegeville State PA Zip Code 19426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Business Operations Team
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-212
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Sullivan, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 737.79

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-965
 Amount of Each Receipt this Period 75.06
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	165.06
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 76 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Sullivan, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 737.79

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-289
 Amount of Each Receipt this Period
 75.06
 Memo Item

B. Swann, Mario, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-639
 Amount of Each Receipt this Period
 33.17
 Memo Item

C. Swann, Mario, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Mgr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 328.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-973
 Amount of Each Receipt this Period
 33.17
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	141.40
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 77 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Tedesco, Annita, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Regulatory Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : 20200513104029-51
 Amount of Each Receipt this Period 62.50
 Memo Item

B. Tedesco, Annita, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director Regulatory Strategy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-386
 Amount of Each Receipt this Period 62.50
 Memo Item

C. Thelen, Timothy, Alan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Asst General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 217.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : 20200526104647-290
 Amount of Each Receipt this Period 21.74
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	146.74
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 78 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Thevenet, Philip, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.86

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-789
 Amount of Each Receipt this Period 37.43
 Memo Item

B. Thevenet, Philip, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.86

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-113
 Amount of Each Receipt this Period 37.43
 Memo Item

C. Thomas, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 409.10

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-344
 Amount of Each Receipt this Period 41.54
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	116.40
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 79 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Thomas, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Rx Account Mgmt Health Sys Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 409.10

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-679
 Amount of Each Receipt this Period 41.54
 Memo Item

B. Thompson, Alfred, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP Vaccine Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 609.83

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-4
 Amount of Each Receipt this Period 62.25
 Memo Item

C. Thompson, Alfred, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) VP Vaccine Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 609.83

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-339
 Amount of Each Receipt this Period 62.25
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	166.04
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 80 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Tjaden, Kristen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.64

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-557
 Amount of Each Receipt this Period 40.25
 Memo Item

B. Tjaden, Kristen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.64

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-892
 Amount of Each Receipt this Period 40.25
 Memo Item

C. Trotter, Stephanie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Coaching
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 523.02

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-911
 Amount of Each Receipt this Period 53.03
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 133.53
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 81 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Trotter, Stephanie, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Drive
 City Philadelphia State PA Zip Code 19112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Director, Coaching
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 523.02

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-235
 Amount of Each Receipt this Period 53.03
 Memo Item

B. Turner, David, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 493.30

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-218
 Amount of Each Receipt this Period 50.10
 Memo Item

C. Turner, David, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 493.30

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-553
 Amount of Each Receipt this Period 50.10
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 153.23
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 82 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Turner, Kathleen, Conlin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.86

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-508
 Amount of Each Receipt this Period 39.11
 Memo Item

B. Turner, Kathleen, Conlin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) District Sales Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 381.86

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-843
 Amount of Each Receipt this Period 39.11
 Memo Item

C. Vandever, Steven, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 241.36

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-929
 Amount of Each Receipt this Period 24.64
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	102.86
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 83 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Vandever, Steven, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.36

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-253
 Amount of Each Receipt this Period 24.64
 Memo Item

B. Walker, John, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec, Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.92

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-799
 Amount of Each Receipt this Period 21.97
 Memo Item

C. Weinberg, Harry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-330
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	96.61
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 84 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Weinberg, Harry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-665
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Weitzel, David, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.59

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-207
 Amount of Each Receipt this Period 27.33
 Memo Item

C. Weitzel, David, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, P.O. Box 13398
 P.O. Box 13398
 City Durham State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Sales Spec Pharma
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 269.59

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-543
 Amount of Each Receipt this Period 27.33
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	104.66
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 85 OF 88
	<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)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Williams, Kimberly, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Fed Gov Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.68

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-552
 Amount of Each Receipt this Period 43.24
 Memo Item

B. Williams, Kimberly, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St. NW, Suite 800
 City Washington DC State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Dir Fed Gov Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.68

Date of Receipt 05 / 21 / 2020
Transaction ID : 20200526104647-887
 Amount of Each Receipt this Period 43.24
 Memo Item

C. Witz, Erik, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Five Moore Drive, PO BOX 13398 P.O. Box 13398
 City Research Triangle State NC Zip Code 27709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 269.54

Date of Receipt 05 / 06 / 2020
Transaction ID : 20200513104029-287
 Amount of Each Receipt this Period 27.29
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	113.77
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: PAGE 86 OF 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Witz, Erik, K., ,

Mailing Address Five Moore Drive, PO BOX 13398
 P.O. Box 13398

City Research Triangle State NC Zip Code 27709

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

Name of Employer (for Individual) GlaxoSmiteKline LLC Occupation (for Individual) Service Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 269.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 21 / 2020

Transaction ID : 20200526104647-622

Amount of Each Receipt this Period
 27.29

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	27.29
TOTAL This Period (last page this line number only).....▶	11068.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

Full Name (Last, First, Middle Initial)

A. Mechanics & Farmers Bank

Mailing Address PO Box 1932

City Durham State NC Zip Code 27702

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 29 / 2020

FEC Identification Number

Transaction ID : C6F91161D87
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. State of Michigan

Mailing Address 430 W Allegan St - 1st Floor

City Lansing State MI Zip Code 48918

Purpose of Disbursement
Jan 2020 Quarterly Late Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
05 / 20 / 2020

FEC Identification Number

Transaction ID : V989B969B67
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Innovation Political Action Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 228 S Washington St
Ste 115

M M M	/	D D D	/	Y Y Y Y Y
05		28		2020

City Alexandria State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement
2020 Contribution

C	C00540187
---	-----------

Candidate Name
Innovation Political Action Committee

011
Category/ Type

Transaction ID : 977A4286A94

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) **Contribution**

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mad 4 Pa PAC

Date of Disbursement

Mailing Address PO Box 444

M M M	/	D D D	/	Y Y Y Y Y
05		28		2020

City Glenside State PA Zip Code 19038

FEC Identification Number

Purpose of Disbursement
2020 Primary

C	C00670844
---	-----------

Candidate Name
Dean, Madeleine, , ,

011
Category/ Type

Transaction ID : 3CA0942AD5!

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: PA District: 04

Disbursement For: 2020
 Primary General
 Other (specify)

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) **▼**

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Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

3500.00

3500.00
