

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MasterCard International Inc. Employees' PAC

ADDRESS (number and street) 2000 Purchase St.
 Check if different than previously reported. (ACC)
Purchase NY 10577

2. **FEC IDENTIFICATION NUMBER** C00410274
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 04 30 2010

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

Type or Print Name of Treasurer Christine Maiolo

Signature of Treasurer Electronically Filed by Christine Maiolo Date 05 17 2010

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

Office Use Only								
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
MasterCard International Inc. Employees' PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		81932.47
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	110851.25									
(c) Total Receipts (from Line 19)	9500.50	58625.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	120351.75	140557.47								
7. Total Disbursements (from Line 31)	29.96	20235.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	120321.79	120321.79								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	8180.00	49885.00
(ii) Unitemized	1320.50	8740.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9500.50	58625.00
(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)	9500.50	58625.00
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 Transfer (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))	9500.50	58625.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9500.50	58625.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	29.96	601.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	29.96	601.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	19000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	633.99
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	29.96	20235.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29.96	20235.68

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	9500.50	58625.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9500.50	58625.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	29.96	601.69
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29.96	601.69

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 / 21
	<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Hannah Berkowitz	Date of Receipt MM / DD / YYYY 04 / 15 / 2010
	Mailing Address 2000 Purchase Street	Transaction ID: 20100413-75-13-55
	City State Zip Code Purchase NY 10577-2405	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard Group Executive, Senior Associate Gene	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Gregory Box	Date of Receipt MM / DD / YYYY 04 / 15 / 2010
	Mailing Address 2200 Mastercard Boulevard	Transaction ID: 20100413-5-13-55
	City State Zip Code O Fallon MO 63368-7263	Amount of Each Receipt this Period 62.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard VP Technology Account Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.00	

C.	Full Name (Last, First, Middle Initial) Jim Carrington	Date of Receipt MM / DD / YYYY 04 / 28 / 2010
	Mailing Address 2000 Purchase Street	Transaction ID: 3A55202809C7518971F
	City State Zip Code Purchase NY 10577-2405	Amount of Each Receipt this Period 291.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MasterCard Global Product Group Executive, Global	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1164.00	

SUBTOTAL of Receipts This Page (optional)	478.00
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 8 / 21		
	<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

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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Joe Casale		Date of Receipt MM / DD / YYYY 04 / 15 / 2010		
	Mailing Address 2000 Purchase Street		Transaction ID: 20100413-71-13-55		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation Business Leader, Product Management			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Andrew Cheskis		Date of Receipt MM / DD / YYYY 04 / 15 / 2010		
	Mailing Address 100 Manhattanville Road		Transaction ID: 20100413-17-13-55		
	City Purchase	State NY	Zip Code 10577-2134	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation SVP/General Auditor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

C.	Full Name (Last, First, Middle Initial) Heidi Davidson		Date of Receipt MM / DD / YYYY 04 / 15 / 2010		
	Mailing Address 2000 Purchase Street		Transaction ID: 20100413-34-13-55		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 350.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation VP/Director State Govt Affairs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1400.00			

SUBTOTAL of Receipts This Page (optional)	▶	725.00
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:	PAGE 9 / 21						
	(check only one)							
	<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

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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Colm Dobbyn		Date of Receipt MM / DD / YYYY 04 / 15 / 2010		
	Mailing Address 2000 Purchase Street		Transaction ID: 20100413-21-13-55		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation SVP/Asst. General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Michael Ellison		Date of Receipt MM / DD / YYYY 04 / 15 / 2010		
	Mailing Address 2000 Purchase Street		Transaction ID: 20100413-46-13-55		
	City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation VP/Financial Analysis			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

C.	Full Name (Last, First, Middle Initial) Lawrence Flanagan		Date of Receipt MM / DD / YYYY 04 / 15 / 2010		
	Mailing Address 2000 Purchase Street		Transaction ID: 20100413-25-13-55		
	City Purchase	State NY	Zip Code 10577-2509	Amount of Each Receipt this Period 416.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MasterCard	Occupation Chief Marking Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1664.00			

SUBTOTAL of Receipts This Page (optional)	▶	641.00
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: PAGE 10 / 21
(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Gary Flood

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation EVP/Customer Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 04 / 22 / 2010
Transaction ID: 8153236D5195A38742E
 Amount of Each Receipt this Period 416.00

B.

Full Name (Last, First, Middle Initial)
Tucker Foote

Mailing Address 1401 Eye Street Northwest Suite 2

City Washington State DC Zip Code 20005-2225

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

Name of Employer MasterCard Occupation Business Leader, Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 21 / 2010
Transaction ID: 2CC552F9495B4637A01
 Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
Maria Haluska

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Leader, Shareholder Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 15 / 2010
Transaction ID: 20100413-29-13-55
 Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ▶ **666.00**

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: PAGE 11 / 21

(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Dora Hanft

Mailing Address 670 W End Ave

City State Zip Code
New York NY 10025-7313

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

Name of Employer Occupation
Spouse of Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 832.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 1 0

Transaction ID: 814E3AFC667A544BF70

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)

Noah Hanft

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1664.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-14-13-55

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)

Justin Howe

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Finance Leader, Financial Analysis

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 668.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-53-13-55

Amount of Each Receipt this Period

167.00

SUBTOTAL of Receipts This Page (optional) ▶

791.00

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: PAGE 12 / 21

(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)

Greg Howes

Mailing Address PO Box 25000

City State Zip Code
Raleigh NC 27640-0100

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

Name of Employer Occupation
MasterCard Global Solutions Leader

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-64-13-55

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James Hull

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard Group Head, Engineering Srvcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 496.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-30-13-55

Amount of Each Receipt this Period

124.00

C.

Full Name (Last, First, Middle Initial)

Joan Kelly

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Systems Enhancement Stratg

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1160.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-2-13-55

Amount of Each Receipt this Period

290.00

SUBTOTAL of Receipts This Page (optional) ▶

514.00

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: PAGE 13 / 21

(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Michael Manchisi

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard SVP/Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1664.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-18-13-55

Amount of Each Receipt this Period

416.00

B.

Full Name (Last, First, Middle Initial)
Chris McWilton

Mailing Address 2000 Purchase Street

City State Zip Code
Purchase NY 10577-2405

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

Name of Employer Occupation
MasterCard Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1664.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-49-13-55

Amount of Each Receipt this Period

416.00

C.

Full Name (Last, First, Middle Initial)
John Meister

Mailing Address 2200 Mastercard Boulevard

City State Zip Code
O Fallon MO 63368-7263

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

Name of Employer Occupation
MasterCard VP/Systems Development

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-12-13-55

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

932.00

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: PAGE 14 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial)
Shawn Miles

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Counsel Sr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 15 / 2010
Transaction ID: 20100413-19-13-55
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Timothy Murphy

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1664.00

Date of Receipt: 04 / 15 / 2010
Transaction ID: 20100413-35-13-55
 Amount of Each Receipt this Period: 416.00

C. Full Name (Last, First, Middle Initial)
Kenneth Najour

Mailing Address 801 Brickell Avenue Suite 130

City Miami State FL Zip Code 33131-2951

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

Name of Employer MasterCard Occupation SVP/Senior Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 496.00

Date of Receipt: 04 / 15 / 2010
Transaction ID: 20100413-52-13-55
 Amount of Each Receipt this Period: 124.00

SUBTOTAL of Receipts This Page (optional) ► 640.00

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: PAGE 15 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial)
Patrick O'Sullivan

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 496.00

Date of Receipt: 04 / 15 / 2010
Transaction ID: 20100413-16-13-55
 Amount of Each Receipt this Period: 124.00

B. Full Name (Last, First, Middle Initial)
Joshua Peirez

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation SVP/Associate General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1416.00

Date of Receipt: 04 / 22 / 2010
Transaction ID: F25862B14748F7CE599
 Amount of Each Receipt this Period: 416.00

C. Full Name (Last, First, Middle Initial)
Bob Reany

Mailing Address 2200 Mastercard Boulevard

City O Fallon State MO Zip Code 63368-7263

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

Name of Employer MasterCard Occupation VP/Information Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 04 / 15 / 2010
Transaction ID: 20100413-10-13-55
 Amount of Each Receipt this Period: 110.00

SUBTOTAL of Receipts This Page (optional) ► 650.00

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: PAGE 16 / 21
(check only one)

<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
							17

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NAME OF COMMITTEE (In Full)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial) Rob Reeg		Date of Receipt MM / DD / YYYY 04 / 15 / 2010
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20100413-9-13-55
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer MasterCard	Occupation SVP/Systems Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1664.00	

B.

Full Name (Last, First, Middle Initial) Richard Santoro		Date of Receipt MM / DD / YYYY 04 / 15 / 2010
Mailing Address 1401 Eye Street Northwest Suite 2		Transaction ID: 20100413-74-13-55
City Washington	State DC	Zip Code 20005-2225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer MasterCard	Occupation Business Leader, Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Joe Schuler		Date of Receipt MM / DD / YYYY 04 / 15 / 2010
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20100413-42-13-55
City O Fallon	State MO	Zip Code 63368-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer MasterCard	Occupation Leader, Systems Programming	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional)	601.00
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: PAGE 17 / 21
(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial) Eileen Simon		Date of Receipt MM / DD / YYYY 04 / 15 / 2010
Mailing Address 2000 Purchase Street		Transaction ID: 20100413-31-13-55
City Purchase	State NY	
Zip Code 10577-2405		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer MasterCard	Occupation Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Edgar Smart		Date of Receipt MM / DD / YYYY 04 / 15 / 2010
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20100413-32-13-55
City O Fallon	State MO	
Zip Code 63368-7263		Amount of Each Receipt this Period 124.00
FEC ID number of contributing federal political committee. C		
Name of Employer MasterCard	Occupation VP/Systems Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 496.00	

C.

Full Name (Last, First, Middle Initial) Patricia Smith-Thurman		Date of Receipt MM / DD / YYYY 04 / 15 / 2010
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20100413-7-13-55
City O Fallon	State MO	
Zip Code 63368-7263		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer MasterCard	Occupation Group Head, Info Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	524.00
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: PAGE 18 / 21
(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial)
Joseph Swezey

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Financial Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 496.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-37-13-55

Amount of Each Receipt this Period
 124.00

B.

Full Name (Last, First, Middle Initial)
Donna Terman

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation VP/Bus Resources-Communication

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-33-13-55

Amount of Each Receipt this Period
 150.00

C.

Full Name (Last, First, Middle Initial)
Frank Tufano

Mailing Address 2000 Purchase Street

City Purchase State NY Zip Code 10577-2405

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

Name of Employer MasterCard Occupation Group Head Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1160.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 1 0

Transaction ID: 20100413-58-13-55

Amount of Each Receipt this Period
 290.00

SUBTOTAL of Receipts This Page (optional) ► **564.00**

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: PAGE 19 / 21
(check only one)

<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)
MasterCard International Inc. Employees' PAC

A.

Full Name (Last, First, Middle Initial) Jeroen Van Erven		Date of Receipt MM / DD / YYYY 04 / 15 / 2010	
Mailing Address 2000 Purchase Street		Transaction ID: 20100413-41-13-55	
City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Financial Analysis		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

B.

Full Name (Last, First, Middle Initial) Timothy Westendorf		Date of Receipt MM / DD / YYYY 04 / 15 / 2010	
Mailing Address 2200 Mastercard Boulevard		Transaction ID: 20100413-39-13-55	
City O Fallon	State MO	Zip Code 63368-7263	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Financial Systems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

C.

Full Name (Last, First, Middle Initial) Mimi Wood		Date of Receipt MM / DD / YYYY 04 / 15 / 2010	
Mailing Address 2000 Purchase Street		Transaction ID: 20100413-44-13-55	
City Purchase	State NY	Zip Code 10577-2405	Amount of Each Receipt this Period 124.00
FEC ID number of contributing federal political committee. C			
Name of Employer MasterCard	Occupation VP/Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 496.00		

SUBTOTAL of Receipts This Page (optional)	▶	324.00
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:	PAGE 20 / 21
	(check only one)	
<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)
MasterCard International Inc. Employees' PAC

A.	Full Name (Last, First, Middle Initial) Kent Young		Date of Receipt
	Mailing Address 2200 Mastercard Boulevard		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	City	State	Zip Code
	O Fallon	MO	63368-7263
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer MasterCard		Occupation VP/Business Management
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	
			Transaction ID: 20100413-43-13-55
			Amount of Each Receipt this Period <input type="text" value="130.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="130.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="8180.00"/>

**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)

PAGE 21 / 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)
MasterCard International Inc. Employees' PAC

A. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CF8D4EFEDA7AC82FCDF Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 3.00 Category/Type: 001
B. Full Name (Last, First, Middle Initial) PNC Bank <hr/> Mailing Address 411 King St. <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Credit Card Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 59D759721B88FAC69AD Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 26.96 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)	29.96
TOTAL This Period (last page this line number only)	29.96