

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
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

ADDRESS (number and street) Five Moore Drive P.O. Box 13358
 Check if different than previously reported. (ACC)
Research Triangle NC 27709

2. **FEC IDENTIFICATION NUMBER** C00199703
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 01 01 2009 through 01 31 2009

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 David Miller

Signature of Treasurer Electronically Filed by David Miller Date 02 20 2009

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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">117172.56</td></tr></table>	117172.56
Y	Y	Y	Y									
2	0	0	9									
117172.56												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">117172.56</td></tr></table>	117172.56										
117172.56												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">72000.15</td></tr></table>	72000.15	<table border="1" style="width: 100%;"><tr><td align="right">72000.15</td></tr></table>	72000.15								
72000.15												
72000.15												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">189172.71</td></tr></table>	189172.71	<table border="1" style="width: 100%;"><tr><td align="right">189172.71</td></tr></table>	189172.71								
189172.71												
189172.71												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">5262.34</td></tr></table>	5262.34	<table border="1" style="width: 100%;"><tr><td align="right">5262.34</td></tr></table>	5262.34								
5262.34												
5262.34												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">183910.37</td></tr></table>	183910.37	<table border="1" style="width: 100%;"><tr><td align="right">183910.37</td></tr></table>	183910.37								
183910.37												
183910.37												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	125.00	125.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	71875.15	71875.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	72000.15	72000.15
(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)	72000.15	72000.15
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))	72000.15	72000.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	72000.15	72000.15

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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.....	24.00	24.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	24.00	24.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
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	8.34	8.34
(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))	8.34	8.34
29. Other Disbursements.....	5230.00	5230.00
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))..	5262.34	5262.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5262.34	5262.34

DETAILED SUMMARY PAGE
of Disbursements

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	72000.15	72000.15
34. Total Contribution Refunds (from Line 28(d))	8.34	8.34
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	71991.81	71991.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	24.00	24.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24.00	24.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 9	
	(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"/> 13	<input type="checkbox"/> 14	<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)
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

A.	Full Name (Last, First, Middle Initial) Daniel J Phelan		Date of Receipt		
	Mailing Address 200 N. 16th Street		M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9		
	City	State	Zip Code	Transaction ID: A2009-2568537	
	Philadelphia	PA	19102	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	125.00	
	Name of Employer GlaxoSmithKline		Occupation SVP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	125.00
TOTAL This Period (last page this line number only)	▶	125.00

**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)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

<p>A. Full Name (Last, First, Middle Initial) Elect Kirk Adams</p> <p>Mailing Address 1110 N Alba Cir</p> <p>City Mesa State AZ Zip Code 85213</p> <p>Purpose of Disbursement P-2010 State House 19 AZ</p> <p>Candidate Name Kirk Adams</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B243795 Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 390.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Cmte to Elect Nancy Barto</p> <p>Mailing Address 3631 East Rockwood Drive</p> <p>City Phoenix State AZ Zip Code 85050</p> <p>Purpose of Disbursement P-2010 State House 07 AZ</p> <p>Candidate Name Nancy Barto</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B243800 Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 390.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Elect Pamela Gorman</p> <p>Mailing Address 3658 W Thalia Ct</p> <p>City Anthem State AZ Zip Code 85086</p> <p>Purpose of Disbursement P-2010 State Senate 06 AZ</p> <p>Candidate Name Pamela Gorman</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B243801 Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 390.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1170.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

A.	Full Name (Last, First, Middle Initial) Vote Chuck Gray Mailing Address 7461 E Ivyglen Street City Mesa State AZ Zip Code 85207 Purpose of Disbursement P-2010 State Senate 19 AZ Candidate Name Chuck Gray Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B243794 Date of Disbursement 01 / 05 / 2009 Amount of Each Disbursement this Period 390.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Linda Lopez for State Senate Mailing Address 1506 E Melridge St City Tucson State AZ Zip Code 85706 Purpose of Disbursement P-2010 State Senate 29 AZ Candidate Name Linda Lopez Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B243797 Date of Disbursement 01 / 05 / 2009 Amount of Each Disbursement this Period 390.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Elect Russell Pearce Mailing Address 1247 E. Inca Street City Mesa State AZ Zip Code 85203 Purpose of Disbursement P-2010 State Senate 18 AZ Candidate Name Russell Pearce Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B243793 Date of Disbursement 01 / 05 / 2009 Amount of Each Disbursement this Period 390.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

1170.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SmithKline Beecham Corp. PAC (GlaxoSmithKline PAC)

A. Full Name (Last, First, Middle Initial) Cmte to Elect Michele Reagan Mailing Address 5235 N. Woodmere Fairway City Scottsdale State AZ Zip Code 85250 Purpose of Disbursement P-2010 State Senate 8 AZ Candidate Name Michele Reagan Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B244208 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 390.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) SmithKline Beecham Corp. PAC-Tennessee Mailing Address Five Moore Drive City Research Triangle State NC Zip Code 27709 Purpose of Disbursement Transfer to State PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B249938 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2890.00

TOTAL This Period (last page this line number only) ►

5230.00