

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2006 JAN 31 10:41

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

MILLENNIUM PHARMACEUTICALS INC. PAC

ADDRESS (number and street)

140 Lansdowne Street

Check if different than previously reported. (ACC)

Cambridge MA 02139

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00040746

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)
[X] 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), Convention (12C), General (12G), Special (12S), Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period

07 / 01 / 2005 through 12 / 31 / 2005

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

Joel S. Goldberg, Treasurer

Signature of Treasurer

[Handwritten Signature]

Date

01 / 30 / 2006

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

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3X (Rev. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

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"/> | | <input type="text" value="1020000"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="1020000"/> | |
| (c) Total Receipts (from Line 19)..... | <input type="text" value="250000"/> | <input type="text" value="850000"/> |
| (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="1270000"/> | <input type="text" value="1270000"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="400000"/> | <input type="text" value="400000"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="870000"/> | <input type="text" value="870000"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="000"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | <input type="text" value="000"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

07 / 01 / 2005

To:

12 / 31 / 2005

| 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)..... | 250000 | |
| (ii) Unitemized..... | | |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 250000 | 250000 |
| (b) Political Party Committees..... | 000 | 000 |
| (c) Other Political Committees (such as PACs)..... | 000 | 000 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶ | 250000 | |
| 12. Transfers From Affiliated/Other Party Committees..... | 000 | 000 |
| 13. All Loans Received..... | 000 | 000 |
| 14. Loan Repayments Received..... | 000 | 000 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 000 | 000 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 000 | 000 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 000 | 000 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 000 | 000 |
| (b) Levin Funds (from Schedule H5)..... | 000 | 000 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 000 | 000 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 250000 | 250000 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 250000 | 250000 |

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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 | 000 | 000 |
| (ii) Non-Federal Share | 000 | 000 |
| (b) Other Federal Operating Expenditures | 000 | 000 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 000 | 000 |
| 22. Transfers to Affiliated/Other Party Committees | 000 | 000 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 4,000.00 | 4,000.00 |
| 24. Independent Expenditures (use Schedule E) | 000 | 000 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) | 000 | 000 |
| 26. Loan Repayments Made | 000 | 000 |
| 27. Loans Made | 000 | 000 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 000 | 000 |
| (b) Political Party Committees | 000 | 000 |
| (c) Other Political Committees (such as PACs) | 000 | 000 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 000 | 000 |
| 29. Other Disbursements | 000 | 000 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 000 | 000 |
| (ii) "Levin" Share | 000 | 000 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 000 | 000 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 000 | 000 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 4,000.00 | 4,000.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 4,000.00 | 4,000.00 |

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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) | 250000 | 250000 |
| 34. Total Contribution Refunds (from Line 28(d)) | 000 | 000 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 250000 | 250000 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 000 | 000 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 000 | 000 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 000 | 000 |

26259683092

**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)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial)
 Deborah Dunsire, M.D.
 Mailing Address
 8 High Meadow Road
 City State Zip Code
 Weston MA 02493
 FEC ID number of contributing federal political committee. C
 Name of Employer Millennium Pharmaceuticals Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25,000.00

Date of Receipt
 12 / 30 / 2005
 Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

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

20030927

**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 7 OF 8 |
| | <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 type="checkbox"/> 29 | <input type="checkbox"/> 30b | |

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals, Inc. AAC

A. Sue Myrick for Congress

Full Name (Last, First, Middle Initial)

Mailing Address: **PO Box 37091**

City: **Charlotte** State: **NC** Zip Code: **28237**

Purpose of Disbursement

Candidate Name: **Sue Myrick** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NC** District: **09**

Date of Disbursement: **07 / 05 / 2005**

Amount of Each Disbursement this Period: **500.00**

B. Richard Burr Committee

Full Name (Last, First, Middle Initial)

Mailing Address: **PO Box 5928**

City: **Winston-Salem** State: **NC** Zip Code: **27113**

Purpose of Disbursement

Candidate Name: **Richard Burr** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NC** District:

Date of Disbursement: **07 / 05 / 2005**

Amount of Each Disbursement this Period: **1000.00**

C. Walter Jones Committee 2006

Full Name (Last, First, Middle Initial)

Mailing Address: **PO Box 99667**

City: **Raleigh** State: **NC** Zip Code: **27624**

Purpose of Disbursement

Candidate Name: **Walter Jones** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NC** District: **03**

Date of Disbursement: **07 / 05 / 2005**

Amount of Each Disbursement this Period: **500.00**

SUBTOTAL of Disbursements This Page (optional).....▶ **2000.00**

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

2602885675

**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 8 OF 8 |
| | <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 type="checkbox"/> 29 | <input type="checkbox"/> 30b | |

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NAME OF COMMITTEE (In Full)
Millennium Pharmaceuticals, Inc. PAC

A. Full Name (Last, First, Middle Initial)
Kennedy for Senate

Mailing Address
301 4th Street, N.E.

City **Washington** State **D.C.** Zip Code **20002**

Purpose of Disbursement

Candidate Name
Edward M. Kennedy

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MA** District:

Date of Disbursement
09 / 13 / 2005

Amount of Each Disbursement this Period
1,000.00

B. Full Name (Last, First, Middle Initial)
Kennedy for Senate

Mailing Address
301 4th Street, N.E.

City **Washington** State **D.C.** Zip Code **20002**

Purpose of Disbursement

Candidate Name
Edward M. Kennedy

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MA** District:

Date of Disbursement
12 / 13 / 2005

Amount of Each Disbursement this Period
1,000.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶ **3,000.00**

TOTAL This Period (last page this line number only) ▶ **4,000.00**

10/2005



Jeffrey F. McHugh
Project Associate - Corporate Law

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2002092700

