

2010 SEP -9 AM 10:09

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

PharmAthene Inc Political Action Committee

ADDRESS (number and street) One Park Place  
Suite 450  
Annapolis MD 21401

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000472019

3. IS THIS REPORT NEW OR AMENDED  
 NEW (N)  OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report  
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31  
(c) 12-Day PRE-Election Report for the: Primary (12P) [checked], General (12G), Convention (12C), Special (12S)  
Election on 09/14/2010 in the State of MD  
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)  
Election on in the State of

5. Covering Period 07/01/2010 through 08/25/2010

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 Charles A. Reinhart III

Signature of Treasurer [Signature] Date 09/08/2010

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 table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PharmAthene Inc. Political Action Committee

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2010

To:

MM / DD / YYYY  
08 / 25 / 2010

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2010	2980.01
(b) Cash on Hand at Beginning of Reporting Period	5068.25
(c) Total Receipts (from Line 19)	3088.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	6068.25
7. Total Disbursements (from Line 31)	2000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4068.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	000
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

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**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

*PharmAthene Inc. Political Action Committee*

Report Covering the Period: From:

*07 01 2010*

To:

*08 25 2010*

**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)

*000*

*3088.24*

(ii) Unitemized

*000*

*000*

(iii) TOTAL (add

Lines 11(a)(i) and (ii) ▶

*000*

*3088.24*

(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) ▶

*000*

*3088.24*

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)) ▶

*000*

*3088.24*

20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶

*000*

*3088.24*

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	000	0.00
(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.....	1,000.00	2,000.00
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	0.00
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))..	1,000.00	2,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1,000.00	2,000.00

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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) .....	000	308824
34. Total Contribution Refunds (from Line 28(d)) .....	000	000
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	000	308824
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

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**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 OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

PharmAthene Inc Political Action Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 / 26 / 2010

A. Mikulski for Senate

Mailing Address

10 G Street, NE, Suite 570

City

Washington DC

State

20002

Zip Code

Purpose of Disbursement

Political Contribution

Candidate Name

Senator Barbara Mikulski

011  
Category/  
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: MD

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

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

1,000.00

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

1,000.00

10030421944

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date  
*9/8/10*  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*James*  
 PREPARER  
 (3/2005)

*9/8/10*  
 DATE PREPARED

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