

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
GlaxoSmithKline LLC 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 2010 through 01 31 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 David Miller

Signature of Treasurer Electronically Filed by David Miller Date 02 18 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)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GlaxoSmithKline LLC PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

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"><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		139189.11
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	139189.11									
(c) Total Receipts (from Line 19)	63551.09	63551.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	202740.20	202740.20								
7. Total Disbursements (from Line 31)	5119.11	5119.11								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	197621.09	197621.09								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
GlaxoSmithKline LLC PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

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)	327.88	327.88
(ii) Unitemized	63207.24	63207.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	63535.12	63535.12
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	15.97	15.97
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	63551.09	63551.09
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))	63551.09	63551.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	63551.09	63551.09

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.....	2619.11	2619.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2619.11	2619.11
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	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.....	2500.00	2500.00
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))..	5119.11	5119.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5119.11	5119.11

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)	63551.09	63551.09
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	63551.09	63551.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2619.11	2619.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2619.11	2619.11

**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 / 9
	<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

A.

Full Name (Last, First, Middle Initial)
John F DelGiorno

Mailing Address 5 Moore Drive

City State Zip Code
Research Triangle NC 27709

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

Name of Employer Occupation
GlaxoSmithKline LLC VP Prof & State Govt Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.99

Date of Receipt
MM / DD / YYYY
01 / 22 / 2010

Transaction ID: A2010-33129

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Daniel J Phelan

Mailing Address 200 N. 16th Street

City State Zip Code
Philadelphia PA 19102

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

Name of Employer Occupation
GlaxoSmithKline LLC SVP Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.76

Date of Receipt
MM / DD / YYYY
01 / 22 / 2010

Transaction ID: A2010-33938

Amount of Each Receipt this Period
127.88

SUBTOTAL of Receipts This Page (optional)	327.88
TOTAL This Period (last page this line number only)	327.88

**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 / 9

<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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
GlaxoSmithKline

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

Purpose of Disbursement
Reimburse Corporation for TN PAC admin expenses

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: TN District:

Not Applicable

Transaction ID: B299756

Date of Disbursement

01 / 04 / 2010

Amount of Each Disbursement this Period

2202.50

SUBTOTAL of Disbursements This Page (optional) ▶

2202.50

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

2202.50

**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)
GlaxoSmithKline LLC PAC

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Marcus Conklin</p> <p>Mailing Address 1600 Palmae Way</p> <p>City Las Vegas State NV Zip Code 89128</p> <p>Purpose of Disbursement P-2010 State House 37 NV</p> <p>Candidate Name Marcus Conklin</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: B299857 Date of Disbursement 01 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Allison Copening</p> <p>Mailing Address 1821 Montvale Ct.</p> <p>City Las Vegas State NV Zip Code 89134</p> <p>Purpose of Disbursement P-2012 State Senate 06 NV</p> <p>Candidate Name Allison Copening</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B299858 Date of Disbursement 01 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Elect Joe Hardy</p> <p>Mailing Address PO Box 60306</p> <p>City Boulder State NV Zip Code 89006</p> <p>Purpose of Disbursement P-2010 State House 20 NV</p> <p>Candidate Name Joe Hardy</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: B299856 Date of Disbursement 01 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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)

PAGE 9 / 9

<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)
GlaxoSmithKline LLC PAC

A.

Full Name (Last, First, Middle Initial)
Cmte to Elect Steven Horsford

Mailing Address 1306 West Craig Rd E-310

City State Zip Code
North Las Vegas NV 89032

Purpose of Disbursement
P-2012 State Senate Clark 04 NV

Candidate Name
Steven Horsford

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B299859

Date of Disbursement

01 / 05 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

2500.00