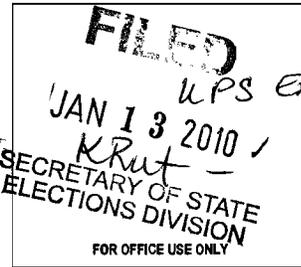


GlaxoSmithKline LLC Political Action Committee

Name (print) GlaxoSmithKline LLC Political Action Committee Office (if applicable) Five Moore Drive, Research Triangle Park, NC 27709 District (if applicable) 202-715-1019
 Mailing Address (include city and zip code) cfs@pass1.com Telephone No 22187
 E-Mail Address

Select Appropriate Box(es) CANDIDATE PAC POL PRY IND EXP NONPROFIT CORP
 AMENDED LEGAL DEFENSE FUND

- Annual Filing - Due January 15, 2009
Period January 1, 2008 - December 31, 2008
- Report #1 - Due March 31, 2009*
Period: Jan. 1, 2009 - March 26, 2009
- Report #2 Due - May 26, 2009*
Period: Mar. 27, 2009 - May 21, 2009
- Report #3 Due - July 15, 2009*
Period: May 22, 2009 - June 30, 2009
- Annual Filing - Due January 15, 2010
*Period: July 1, 2009 - December 31, 2009
**Period: Jan. 1, 2009 - December 31, 2009



* These Reports are filed by incumbents/candidates running for office in the 2009 election cycle
 ** These Reports are filed by incumbents not running for office this cycle who: (1) raised contributions in excess of \$100; or (2) have money left over from a previous campaign

CONTRIBUTIONS SUMMARY		
	Amount	Reporting Period
1. Total Monetary Contributions Received in Excess of \$100 (See page 1 of instruction sheet)	0.00	0.00
2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)	0.00	0.00
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)	0.00	0.00
4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	0.00	0.00
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet)	0.00	0.00
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet)	0.00	0.00
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)	0.00	0.00

EXPENSES SUMMARY		
	Amount	Reporting Period
8. Total Monetary Expenses Paid in Excess of \$100 (see page 2 of instruction sheet)	0.00	0.00
9. Total Monetary Expenses Paid of \$100 or Less (see page 2 of instruction sheet)	0.00	0.00
10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (see page 2 of instruction sheet)	0.00	0.00
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)	0.00	0.00
12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or Incumbent does not run for reelection) (see page 3 of instruction sheet)	N/A	

AFFIRMATION
 I Declare Under Penalty of Perjury That the Forgoing is True and Correct.
 Signature David Miller Date 1.8.2010