

Clerk of the House of Representatives Legislative Resource Center 135 Cannon Building Washington, DC 20515 http://lobbyingdisclosure.house.gov	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510 http://www.senate.gov/lobby
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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name <input checked="" type="checkbox"/> Organization/Lobbying Firm <input type="checkbox"/> Self Employed Individual AstraZeneca Pharmaceuticals LP			
2. Address Address1 1800 CONCORD PIKE, P.O. BOX 15437 Address2 _____ City WILMINGTON State DE Zip Code 19850-5437 Country USA			
3. Principal place of business (if different than line 2) City _____ State _____ Zip Code _____ Country _____			
4a. Contact Name Ms. Jamie Bell	b. Telephone Number 2023505550	c. E-mail jamie.bell@astrazeneca.com	5. Senate ID# 54073-12
7. Client Name <input checked="" type="checkbox"/> Self <input type="checkbox"/> Check if client is a state or local government or instrumentality AstraZeneca Pharmaceuticals LP			6. House ID# 349750000

TYPE OF REPORT

8. Year 2019 Q1 (1/1 - 3/31) Q2 (4/1 - 6/30) Q3 (7/1 - 9/30) Q4 (10/1 - 12/31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report Termination Date _____ 11. No Lobbying Issue Activity

INCOME OR EXPENSES - YOU MUST complete either Line 12 or Line 13

<p>12. Lobbying</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$5,000 <input type="checkbox"/></p> <p>\$5,000 or more <input type="checkbox"/> \$ _____</p> <p>Provide a good faith estimate, rounded to the nearest \$10,000, of all lobbying related income for the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p>13. Organizations</p> <p>EXPENSE relating to lobbying activities for this reporting period were:</p> <p>Less than \$5,000 <input type="checkbox"/></p> <p>\$5,000 or more <input checked="" type="checkbox"/> \$ <u>1,060,000.00</u></p> <p>14. REPORTING Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Signature Digitally Signed By: Jamie Bell

Date _____

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Add additional page(s) as needed.

15. General issue area code HCR

16. Specific lobbying issues

- Value of Prescription Drugs
- Value Based Agreements (VBAs)- PAVE Act
- Biosimilars
- Rebate Reform
- Pricing Transparency: SPIKE Act, HR 2069 and STAR Act, HR 2113
- Oncology Care Model - CMS
- Personalized Medicine
- H.R. 6, SUPPORT for Patients and Communities Act -House & Senate

17. House(s) of Congress and Federal agencies Check if None

U.S. SENATE, U.S. HOUSE OF REPRESENTATIVES, Health & Human Services - Dept of (HHS), Centers For Medicare and Medicaid Services (CMS)

18. Name of each individual who acted as a lobbyist in this issue area

First Name	Last Name	Suffix	Covered Official Position (if applicable)	New
Theresa	Jolivette			<input type="checkbox"/>
Natalie	Morris			<input type="checkbox"/>
Helen	Dwight			<input type="checkbox"/>
Morgan	Bradley-Jones			<input type="checkbox"/>
Susie	Ahn			<input type="checkbox"/>
Julie	Garner			<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Add additional page(s) as needed.

15. General issue area code MMM

16. Specific lobbying issues

- Medicare Part D Coverage and Reimbursement
- Medicare Part D Non-Interference
- Legislative proposals to change Medicare Part D
- Medicare Part B coverage and reimbursement
- Medicaid Coverage
- Rebate reform
- Medicare Part B IPU proposed rule – House
- Changes to the Medicaid Drug Rebate Program (AMP Cap) – House
- Medicare Part B Intl. Pricing Index ANPRM – Senate & House & CMS

17. House(s) of Congress and Federal agencies Check if None

U.S. SENATE, U.S. HOUSE OF REPRESENTATIVES, Health & Human Services - Dept of (HHS), Centers For Medicare and Medicaid Services (CMS)

18. Name of each individual who acted as a lobbyist in this issue area

First Name	Last Name	Suffix	Covered Official Position (if applicable)	New
Natalie	Morris			<input type="checkbox"/>
Helen	Dwight			<input type="checkbox"/>
Morgan	Bradley-Jones			<input type="checkbox"/>
Susie	Ahn			<input type="checkbox"/>
Theresa	Jolivette			<input type="checkbox"/>
Julie	Garner			<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Add additional page(s) as needed.

15. General issue area code PHA

16. Specific lobbying issues

- Medicare coverage
- Value of Prescription Drugs, Senate & House
- Prescription Drug Importation, Senate & House
- Innovative Payment Models, Senate & House
- Price Transparency, Senate & House
- CDC Asthma Funding, Senate
- Legislative proposals to change Medicare Part D & B
- Medicaid and 340B issues & drug discount program
- President's Drug Pricing Blueprint

17. House(s) of Congress and Federal agencies Check if None

U.S. SENATE, U.S. HOUSE OF REPRESENTATIVES, Centers For Disease Control & Prevention (CDC), Health & Human Services - Dept of (HHS)

18. Name of each individual who acted as a lobbyist in this issue area

First Name	Last Name	Suffix	Covered Official Position (if applicable)	New
Theresa	Jolivette			<input type="checkbox"/>
Natalie	Morris			<input type="checkbox"/>
Helen	Dwight			<input type="checkbox"/>
Morgan	Bradley-Jones			<input type="checkbox"/>
Susie	Ahn			<input type="checkbox"/>
Julie	Garner			<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Add additional page(s) as needed.

15. General issue area code CPT

16. Specific lobbying issues

FDA Patent Settlement legislation – House

17. House(s) of Congress and Federal agencies Check if None

U.S. HOUSE OF REPRESENTATIVES, U.S. SENATE

18. Name of each individual who acted as a lobbyist in this issue area

First Name	Last Name	Suffix	Covered Official Position (if applicable)	New
Theresa	Jolivette			<input type="checkbox"/>
Helen	Dwight			<input type="checkbox"/>
Morgan	Jones			<input type="checkbox"/>
Susie	Ahn			<input type="checkbox"/>
Natalie	Morris			<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address _____
 City _____ State _____ Zip Code _____ Country _____

21. Client new principal place of business (if different than line 20)

City _____ State _____ Zip Code _____ Country _____

22. New General description of client's business or activities



LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

First Name	Last Name	Suffix	First Name	Last Name	Suffix
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ISSUE UPDATE

24. General lobbying issue that no longer pertains



AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Internet Address:

Name	Address				Principal Place of Business (city and state or country)
	Street Address	State/Province	Zip	Country	

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities:

Name	Address			Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client
	Street Address	State/Province	Country			

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, client or affiliated organization

CONVICTIONS DISCLOSURE

29. Have any of the lobbyists listed on this report been convicted in a Federal or State Court of an offense involving bribery, extortion, embezzlement, an illegal kickback, tax evasion, fraud, a conflict of interest, making a false statement, perjury, or money laundering?

No Yes

Lobbyist Name	Description of Offense(s)
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