DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 **OLYMPIA WA 98504-0908** (360) 753-1111

Employer's **Lobbying Expenses**

RECEIVED

THIS SPACE FOR OFFICE USE

CONTINUE ON REVERSE

TOLL FREE 1-877-601-2828 Employer's Name (Use complete company, association, union or entity name.) MasterCard Worldwide Attention (Identify person to whom inquiries about the information below should be directed; NOT the lobbyist.) Public Disclosure Commission Patrick Dwyer Mailing Address 2000 Purchase Street 914-602-2803 City State $Z_{in} + 4$ E-Mail Address Year Report Covers Patrick dwywew @mastercard.com **Purchase** 2016 NY 10577 THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Include expenditures made and accrued during the previous calendar year for lobbying the Washington State Legislature and/or any state agency. Complete all sections. Use "none" or "0" when applicable. Identify each of your lobbyists/lobbying firms below. In column 1, show the full amount of salary or fee each earned for lobbying. In column 2, show the full amount paid (plus obligated) for other lobbying related expenses that were made by or through the lobbyist and reported by the lobbyist on the monthly L-2 report (e.g., contributions to legislative candidates, reimbursement for entertainment expenses, etc.). Compute the subtotals across and down the columns; put the grand total of expenses incurred by or through lobbyists in the space designated. Names of Registered Lobbyists (if payments were to lobbying firm, list firm name) Total Amount Steve Duncan (Duncan and Associates) 70.000.00 Total From Attached Page \$ 70 COO (Total Expenses By or Through Lobbyists ☐ Information continued on attached pages DO NOT INCLUDE EXPENDITURES ALREADY ACCOUNTED FOR IN ITEM 2 ABOVE when completing Items 3 through 7 below. Other expenditures made by the employer for lobbying purposes. Show total expenditures made/accrued: a. to vendors on behalf of or in support of registered lobbyists (e.g., entertainment credit card purchases); to or on behalf of expert witnesses or others retained to provide lobbying services who offer specialized knowledge or expertise that assists the employer's lobbying effort; for entertainment, tickets, passes, travel expenses (e.g., transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families; (Also complete Item 9.) for composing, designing, producing and distributing informational materials for use primarily to influence legislation; and for grass roots lobbying expenses, including those previously reported by employer on Form L-6, and payments for lobbying communications to clients/customers (other than to corporate stockholders and members of an organization or union). Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. (Also complete Item 10.) Contributions made directly by the employer, including those previously reported on PDC Form L-3c. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this L-3 report.) Name of PAC Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also complete Item 11.) Expenditures to or on behalf of legislators, state officials, or their spouse, registered domestic partner and dependents for the purpose of influencing, honoring or benefiting the legislator or official. (Normal course of business payments are not reportable.) (Also complete Item 14.) Other lobbying-related expenditures, whether through or on behalf of a registered lobbyist. Attach list itemizing each expense (i.e., show date, recipient, purpose and amount). Do not include payments accounted for above. **Total Lobbying Expenses** (Items 2 thru 7) 8. This report must be certified by the president, secretary-treasurer or similar office of lobbying employer. Certification: I certify that this report is true, complete and correct to the best of my Signature of Employer Officer knowledge IP Masteran L Printed Name and Title of Officer:

Employer's Name			r report covers:		
MasterCard Worldwide		2	016		
9. Entertainment, tickets, passes, travel expenses (including transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state					
employees and members of their immediate families. See instruction manual for details.					
Name and Title		Cost or Value	Date and Description of Expense		
		\$			
	• 5				
☐ Information continued on attached pages					
10. Contributions (not reported by the lobbyist) totaling over	\$25 to a legislative or statewide ex	l ecutive office candida	te a committee formed to support or oppose one of these		
candidates or a committee supporting or opposing a state					
Name of Recipient		Amount	Date (and, if In-Kind, Description)		
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11. Independent expenditures in support of or opposition to a) a lacialativa as atatawida ayaaytiy		No otatomido hollat manacidia		
See instruction manual for definition of "independent	expenditure."	e office candidate of t	a statewide battot proposition.		
Candidate's Name, Office Sought &		Amount	Date and Description of Expense		
Ballot Proposition Number & Brief D			(Note if Support or Oppose)		
*					
		\$			
		-			
☐ Information continued on attached pages	•				
12. Compensation of \$2,400 or more during the preceding cal	lendar year for employment or prof	essional services paid	to state elected officials, successful candidates for state		
office and each member of their immediate family.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*	,		
Name	Relationship to Candidate or	Amount (Code)**	Description of Consideration or Services Exchanged for		
	Elected Official if Member of		Compensation		
	Family				
The formation continued on attached account			, ,		
Information continued on attached pages 13. Compensation of \$2,400 or more during the preceding cal	endar year for professional services	s naid to any cornecti	on partnership joint venture association or other cation		
in which state elected official, successful state candidate of the control of the	or member of their immediate famil	y hold office, partners	hip, directorship or ownership interest of 10% or more.		
Firm Name	Person's Name		Description of Consideration or Services Exchanged for		
Carring de La Carring	The state of the s	' '	Compensation		
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☐ Information continued on attached pages			,		
14. Any expenditure, not otherwise reported, made directly or	indirectly to a state elected official	l, successful candidate	for state office or member of their immediate family. if		
made to honor, influence or benefit the person because of his or her official position.					
Name		Amount	Date and Purpose		
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		\$	•		
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☐ Information continued on attached pages		-			
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**DOLLAR CODE AMOUNT

A - \$1 to \$4,499 B - \$4,500 to \$23,999 C - \$24,000 to \$47,999

**DOLLAR
CODE AMOUNT

D - \$48,000 to \$119,999 E - \$120,000 or more

INFORMATION CONTINUED

(Use this page if you need additional space for Items 2 or 9)

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mployer's Name Year report covers: MasterCard Worldwide 2016				
2. Names of Registered Lobbyists	Col 1-Salary		Total Amount	
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Total From This Page			,	
9. Entertainment, etc.			· · · · · · · · · · · · · · · · · · ·	
Name and Title	Cost or Value	Date and Descripti	on of Expense	
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INFORMATION CONTINUED (Use this page if you need additional space for Items 10 or 11)

Employer's Name MasterCard Worldwide	Year report covers: 2016		
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10. Contributions Name of Recipient	Amount	Date (and, if In-Kind, Description)	
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11. Independent expenditures			
Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount	Date and Description of Expense (Note if Support or Oppose)	
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INFORMATION CONTINUED

(Use this page if you need additional space for Items 12 thru 14)

Employer's Name		Year report covers:			
MasterCard Worldwide		2016			
12. Compensation of \$2,400 or more for employment, etc. Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation		
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13. Compensation of \$2,400 or more for professional service	S ı				
Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation		
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14. Any expenditure not otherwise reported					
Name		Amount	Date and Purpose		
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