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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ALLEGHENY TECHNOLOGIES INCORPORATED POLITICAL ACTION COMMITTEE (AT-PAC) 1000 SIX PPG PLACE ADDRESS (number and street) (Check if address is changed) **PITTSBURGH** 15222 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS karl.schwartz@atimetals.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00141697 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Schwartz, Karl, D.,, Type or Print Name of Treasurer Schwartz, Karl, D.,, [Electronically Filed] 01 22 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Only Local 202-694-1100

FEC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF C	OMMITTEE • Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliati	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate.  This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	
`′ Ц	committees/organizations, none of which is an authorized committee of a federal candidate.	
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name	e			-
ALLEGHENY TECHN	NOLOGIES INCORPORATEI	D POLITICAL AG	CTION COMM	ITTEE (AT-PAC)
	Organization, Affiliated Committee, Joi			
ALLEGHENY TECHNO	DLOGIES INCORPORATED P	OLITICAL ACTIC	ON COMMITTE	E (AT-PAC)
Mailing Address	1000 SIX PPG PLACE			
	PITT\$BURGH		PA 15222	
	CITY		STATE	ZIP CODE
Relationship: <b>x</b> Connecte	d Organization Affiliated Committee	Joint Fundraising R	Representative L	eadership PAC Sponsor
Custodian of Records: Idea books and records.	ntify by name, address (phone number -	optional) and position	n of the person in po	ossession of committee
Schwartz,	, Karl, D., ,			
Full Name	,1000 Six PPG Place			
Mailing Address				
	Pittsburgh		PA 15222	
Title or Position	CITY	S	STATE	ZIP CODE
Treasurer		Telephone numb	er 412 - L	395   -   3093
3. <b>Treasurer:</b> List the name an any designated agent (e.g.,	nd address (phone number optional) o assistant treasurer).	f the treasurer of the c	committee; and the n	ame and address of
Full Name Schwartz, of Treasurer	Karl, D., ,		1 1 1 1 1 1 1	
Mailing Address	1000 Six PPG Place			
	Pittsburgh		PA 15222	
Title or Position Treasurer	CITY		TATE   412	ZIP CODE  395   3093
<u> </u>		Telephone number	er L	

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
B 1 -		
safety deposit boxes or in Name of Bank, Deposito		funds, holds accounts, rents
safety deposit boxes or i Name of Bank, Deposito	maintains funds.  bry, etc.  C Bank	funds, holds accounts, rents
safety deposit boxes or in Name of Bank, Deposito	maintains funds.  ory, etc.  C Bank  Six PPG Place	
safety deposit boxes or in Name of Bank, Deposito	maintains funds.  Dry, etc.  Six PPG Place  Pittsburgh  PA  CITY  STATE	
safety deposit boxes or in Name of Bank, Deposito	maintains funds.  Dry, etc.  Six PPG Place  Pittsburgh  PA  CITY  STATE	
safety deposit boxes or in Name of Bank, Deposito	maintains funds.  Dry, etc.  Six PPG Place  Pittsburgh  PA  CITY  STATE	
safety deposit boxes or in Name of Bank, Deposito  PNC  Mailing Address  Name of Bank, Deposito	maintains funds.  Dry, etc.  Six PPG Place  Pittsburgh  PA  CITY  STATE	
safety deposit boxes or in Name of Bank, Deposito  PNC  Mailing Address  Name of Bank, Deposito	maintains funds.  Dry, etc.  Six PPG Place  Pittsburgh  PA  CITY  STATE	15222   1