STATEMENT OF

| FORM 1 | ORGANIZA (See instructio | | | |
|------------------------------------|--|--|--------------|---------------------------------|
| | <u> </u> | <u> </u> | | Office use only |
| NAME OF COMMITTEE (in a | (Check if name is changed) | Example: If typying, type over the lines | 12FE4M5 | |
| American Iron | and Steel Institute Political Acti | on Committee (Steel PA- | | |
| | | | | |
| ADDRESS (number and s | street) 1140 Connecticut Av | venue, NW | | |
| (Check if address | Suite 705 | | 11111 | |
| is changed) | Washington | | DC | 20036 |
| | | CITY | STATE▲ | ZIP CODE 📥 |
| COMMITTEE'S E-MAI | L ADDRESS (Please provide only one e- | mail address) | | |
| (Check if address X is changed) | chughes@steel.org | | | |
| | | | | |
| COMMITTEE'S WEB | PAGE ADDRESS (URL) | | | |
| (Check if address | | | | 1111111 |
| is changed) | | 111111111 | 1 1 1 1 1 1 | |
| 2. DATE 0.2 | / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| 3. FEC IDENTIFICA | TION NUMBER | C C00295097 | | |
| 4. IS THIS STATEM | ENT X NEW (N) OR | AMENDED (A) | | |
| I certify that I have exami | ned this Statement and to the best of my kno | wledge and belief it is true, correct a | and complete | |
| Type or Print Name of | Treasurer Mr. Thomas J. G | iibson | | |
| Signature of Treasurer | Electronically Filed by Mr. Thom | as J. Gibson | Date 0 2 | 19 / 2010 |
| NOTE: Submission of fall | se, erroneous, or incomplete information ma | y subject the person signing this Sta | · | |
| Office | | For further information | contact: | EEC EODM 1 |
| Use Only | | Federal Election Commi Toll Free 800-424-9530 | | FEC FORM 1 (Revised 02/2009) |

| | F | FEC F | Form 1 (Revised 02/2009) | Page 2 | | | | | |
|----|----------------|---------------------|--|---|--|--|--|--|--|
| 5. | | | DMMITTEE (Check One) 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. (Complete information below.) | the candidate | | | | | |
| | Name Candi | | | | | | | | |
| | Candi Party | idate Affiliatio | on Office Sought: House Senate President | State District | | | | | |
| | (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | | | |
| | Name Candi | | | | | | | | |
| | Party | Comm | Committee: | | | | | | |
| | (d) | | This committee is a (National, State (or subordinate) committee of the | (Democratic, Republican,etc.) Party. | | | | | |
| | Politic | cal Act | ion Committee (PAC): | | | | | | |
| | (e) | X | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected | ed organization is a: | | | | | |
| | | | Corporation Corporation w/o Capital Stock La | abor Organization | | | | | |
| | | | Membership Organization X Trade Association C | ooperative | | | | | |
| | | | χ In addition, this committee is a Lobbyist/Registrant PAC. | | | | | | |
| | (f) | | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee) | ed 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.) | | | | | | |
| | loint E | Eundra | ising Representative: | | | | | | |
| | | unura | | | | | | | |
| | (g) | Ш | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate. | or more political | | | | | |
| | (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate. | or more political | | | | | |
| | | Com | mittees Participating in Joint Fundraiser | | | | | | |
| | | | 1. FEC ID number C | | | | | | |
| | | | 2. FEC ID number C | | | | | | |
| | | | 3. FEC ID number C | | | | | | |
| | | | EEC ID number | | | | | | |

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|----|---|---|----------------------------------|-------------------------|
| W | rite or Type Committee Name | | | |
| | American Iron and Stee | I Institute Political Action Commi | ttee (Steel PAC) | |
| 6. | Name of Any Connected Org | panization, Affiliated Committee, Joint I | Fundraising Representative, or I | _eadership PAC Sponsor |
| | The American Iron and S | teel Institute | | |
| | | | 1 1 1 1 1 1 1 1 1 1 | |
| | Mailing Address | 1140 Connecticut Av | enue, NW | |
| | | Suite 705 | | |
| | | Washington | pc pc | 20036 |
| | | CITY | STATE ▲ | ZIP CODE 🛕 |
| | Relationship: | | | |
| | X Connected Organization | Affiliated Committee | Joint Fundraising Representative | Leadership PAC Sponsor |
| 7. | Custodian of Records: Ide possession of Committee | ntify by name, address, (phone nun books and records. | nber optional), and position | of the person in |
| | Full Name Mr. Chr | ristopher L. Hughes | | |
| | Mailing Address | 1140 Connecticut Av | enue, NW | |
| | | Suite 705 | | |
| | | Washington | DC | 20036 |
| | Title or Position ▼ | CITY A | STATE | ZIP CODE A |
| | Manager, (| Gov't Rel. | Telephone number | <u> 2 – 452 – 7100 </u> |
| | | | | |
| 8. | | and address (phone number optic designated agent (e.g., assistant tr | • | mmittee; and the |
| | Full Name of Treasurer Mr. The | omas J. Gibson | | |
| | Mailing Address | 1140 Connecticut Avenue, NW | | |
| | - | Suite 705 | | |
| | | Washington | | 20036 |
| | Title or Position ♥ | CITY A | STATE | ZIP CODE A |
| | President, | CEO | Telephone number | 02 _ 452 _ 7100 |
| | | | | |

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|--|--|----------------------------------|----------------------|
| Full Name of Designated Agent | Mr. Kevin Dempsey | | |
| Mailing Address | 1140 Connecticut Avenue, | NW | |
| | Suite 705 | | |
| | Washington | DC | 20036 – |
| Title or Position ▼ | CITY A | STATE 🛦 | ZIP CODE A |
| Sr. V.P | ., Pub. Pol. | Telephone number 202 | 4527100 |
| | | | |
| Banks or Other Deposit safety deposit boxes or m Name of Bank, Depositor | naintains funds. ry, etc. | the committee deposits funds, ho | olds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | naintains funds. | the committee deposits funds, ho | olds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | naintains funds. ry, etc. achovia Bank, National Association | the committee deposits funds, ho | olds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | naintains funds. ry, etc. achovia Bank, National Association | the committee deposits funds, ho | olds accounts, rents |
| safety deposit boxes or m Name of Bank, Depositor | naintains funds. ry, etc. achovia Bank, National Association P.O. Box 563966 | | |
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| safety deposit boxes or m Name of Bank, Depositor W Mailing Address Name of Bank, Depositor | raintains funds. ry, etc. achovia Bank, National Association P.O. Box 563966 Charlotte CITY | NC NC | 28256 _ |
| safety deposit boxes or m Name of Bank, Depositor W Mailing Address Name of Bank, Depositor | raintains funds. ry, etc. achovia Bank, National Association P.O. Box 563966 Charlotte CITY | NC NC | 28256 _ |