Image# 15951462354				00/10/2015 12 . 05
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
			Office	e Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Talen Energy Co	prporation PAC			1
ADDRESS (number and street)	Floor 2 - Government Relatio	ns 		
(Check if address	835 Hamilton Street, Suite 15	50		
is changed)	Allentown	· · · · · · · · · · · ·	PA 18101	-2400
			L L STATE ▲	
COMMITTEE'S E-MAIL ADDRI	ESS ,Russell.Clelland@Tale	nEnergy com		
(Check if address is changed)				
	Optional Second E-Mail Ad	dress		
	Stephen.Bennett@T			
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
)1 / Y Y Y Y 2015			
3. FEC IDENTIFICATION N	UMBER ► C c	00577874		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined t	this Statement and to the best	of my knowledge and belief it	is true, correct and c	omplete.
-				
Type or Print Name of Treasure	er Mr. Russell R. Clelland			
Signature of Treasurer	Russell R. Clelland	[Electronically Filed]	Date 06	10 / Y Y Y Y 10 2015
NOTE: Submission of false, error		may subject the person signing ON SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ion F	EC FORM 1 (Revised 06/2012)

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FEC FC	rm 1 (Revised 02/2009)	Page 2
TYPE OF C	COMMITTEE	
Candidate	e 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. (Comp information below.)	lete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)		Democratic, Republican, etc.) Part
Political A	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	ected 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 seg committee. (i.e., nonconnected committee)	pregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	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.	o 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.	o or more political
Corr	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Talen Energy Corporation PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Talen Energy Corpora	tion			
Mailing Address	835 Hamilton Street, Suite 150			
	Allentown		PA 181	101-2400
	CITY		STATE	ZIP CODE
Relationship: X Connected	l Organization Affiliated Committee	Joint Fundraising	Representative	Leadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee				

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Mr. Robert	Barkanic
Full Name	
Mailing Address	Floor 2 - Government Relations
	835 Hamilton Street, Suite 150
	Allentown
Title or Position	CITY STATE ZIP CODE
Sr. Dir-Ext. Affairs	610 774 6722 Telephone number 1 1

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name Model of Treasurer	Mr. Russell R. Clelland	
Mailing Address	Floor 7 - Treasury	
	835 Hamilton Street, Suite 150	
	Allentown	PA 18101-2400 -
	CITY	STATE ZIP CODE
Title or Position		610 774 4480 Telephone number

Full Name of Designated Agent	Ms. Karla A. Durn
Mailing Address	Floor 7 - Treasury
	835 Hamilton Street, Suite 150
	Allentown
	CITY STATE ZIP CODE
Title or Position Dir Investmen	ts Telephone number = 7746879

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	The Bank of New York Mellon	
Mailing Address	500 Ross Street	
	Pittsburgh	PA 15262-0001
	CITY	STATE ZIP CODE
Name of Bank, [epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE