01/27/2004 10 : 40

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

KOPPERS INC. PAC

ADDRESS (Number and Street)

436 SEVENTH AVENUE SUITE 1700

(Check if address is changed)

PITTSBURGH | PA | 15219 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Koppersincpac@koppers.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

4122272935

2. DATE M M D D Y Y Y Y 01 24 2004

3. **FEC IDENTIFICATION NUMBER** **C C00391821**

4. IS THIS STATEMENT X 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

Type or Print Name of Treasurer Mr. Joseph Calfe

Signature of Treasurer Electronically Filed by Mr. Joseph Calfe Date M M D D Y Y Y Y 01 27 2004

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

(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 the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought: House Senate President

State District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican,etc.) Party.

(e) X This committee is a separate segregated fund

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

KOPPERS INC.

Mailing Address 436 Seventh Avenue

Pittsburgh PA 15219 - 1800

CITY STATE ZIP CODE

Relationship Connected

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

KOPPERS INC. PAC

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

Full Name: Mr. Joseph Calfe

Mailing Address: 436 Seventh Avenue
Suite 1700

CITY ▲	STATE ▲	ZIP CODE ▲
Pittsburgh	PA	15219 – 1800

Title or Position ▼: PAC Treasurer

Telephone number: 412 – 227 – 2343

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 of Treasurer: Mr. Joseph Calfe

Mailing Address: 436 Seventh Avenue
Suite 1700

CITY ▲	STATE ▲	ZIP CODE ▲
Pittsburgh	PA	15219 – 1800

Title or Position ▼: PAC Treasurer

Telephone number: 412 – 227 – 2343

Full Name of Designated Agent: Mr. McCurrie Brian

Mailing Address: 436 Seventh Avenue
Suite 1550

CITY ▲	STATE ▲	ZIP CODE ▲
Pittsburgh	PA	15219 – 1800

Title or Position ▼: Assistant Treasurer

Telephone number: 412 – 227 – 2153

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.

National City Bank

Mailing Address 20 Stanwix Street

Pittsburgh PA 15222 - 4822

CITY STATE ZIP CODE