

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

SSAB Americas PAC SSAB Enterprises LLC

ADDRESS (number and street)

11 N. Water Street Suite 17000

(Check if address is changed)

Mobile

AL

33602-

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

terry.federko@ssab.com

Optional Second E-Mail Address

outsourcing@aristotle.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

01 / 25 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00513861

4. 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.

Type or Print Name of Treasurer Federko, Terry, , ,

Signature of Treasurer

Federko, Terry, , ,

[Electronically Filed]

Date

01

28

2021

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 06/2012)

5. TYPE OF COMMITTEE

Candidate 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 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 _____

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - 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 segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

Write or Type Committee Name

SSAB Americas PAC SSAB Enterprises LLC

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

SSAB US Holding Inc. SSAB Enterprises LLC

Mailing Address 11 N Water St
 Ste 17000
 Mobile AL 36602-5037
 CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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 Aristotle, International, , ,
 Mailing Address 205 Pennsylvania Ave SE
 Washington DC 20003-1164
 CITY STATE ZIP CODE
 Title or Position
 Custodian of Records Telephone number 586 909 3285

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 Federko, Terry, , ,
 Mailing Address 11 N Water St
 Ste 1700
 Mobile AL 36602-3809
 CITY STATE ZIP CODE
 Title or Position
 Treasurer Telephone number 251 264 3810

Full Name of Designated Agent

Federko, Terry, , ,

Mailing Address

11 N Water St

Ste 1700

Mobile

AL

36602-3809

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

251

264

3810

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.

Regions Bank

Mailing Address

11 N Water Street

Mobile

AL

36602

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1N
Transaction ID :

Updating Bank information

Form/Schedule:
Transaction ID: