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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) ENTURY ALUMINUM COMPANY PAC 1627 STATE HIGHWAY 3543 ADDRESS (number and street) (Check if address is changed) **HAWESVILLE** 42348 KY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jesse.gary@centuryaluminum.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2014 C00555532 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. Mr. Jesse Gary Type or Print Name of Treasurer Mr. Jesse Gary [Electronically Filed] 07 2014 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

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	raye Z
Car	ndidate	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. (Con information below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		X 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

			_
FEC Form 1 (Revise Write or Type Committee Na			Page 3
	LUMINUM COMPANY	/ PAC	
	d Organization, Affiliated Committee, Jo		Leadership PAC Sponsor
Century Aluminum C	Company		
	One South Wester Prive		
Mailing Address	One South Wacker Drive		
	Suite 1000		
	Chicago		60606
	CITY	STATE	ZIP CODE
Relationship: X Connec	cted Organization Affiliated Committee	Joint Fundraising Representative	e Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	dentify by name, address (phone number	optional) and position of the perso	on in possession of committee
Mr. Jes Full Name	sse Gary		
Mailing Address	One South Wacker Drive		
	Suite 1000		
	Chicago	IL I	60606
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number 312	696 3106
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) o j., assistant treasurer).	f the treasurer of the committee; an	nd the name and address of
Full Name Mr. Jess of Treasurer	se Gary		
Mailing Address	One South Wacker Drive		
	Suite 1000	<u> </u>	
	Chicago		60606
	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number 312	- 696 - 3106

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Full Name of Designated		
Agent		
Mailing Address	5	
	CITY STATE	ZIP CODE
Title or Position		2 3352
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds. Depository, etc.	
safety deposit I Name of Bank,	Depository, etc. Wells Fargo NA 1420 Montgomery Street	<u> </u>
safety deposit b	Depository, etc. Wells Fargo NA 1420 Montgomery Street	
safety deposit I Name of Bank,	Depository, etc. Wells Fargo NA 420 Montgomery Street	
safety deposit I Name of Bank,	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor	
safety deposit to Name of Bank, Mailing Address	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor San Francisco CA 9410)4
safety deposit to Name of Bank, Mailing Address	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor San Francisco CITY STATE)4
safety deposit to Name of Bank, Mailing Address	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor San Francisco CITY STATE)4
safety deposit to Name of Bank, Mailing Address	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor San Francisco CITY STATE Depository, etc.)4
safety deposit It Name of Bank, Mailing Address Name of Bank,	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor San Francisco CITY STATE Depository, etc.)4
safety deposit It Name of Bank, Mailing Address Name of Bank,	Depository, etc. Wells Fargo NA 420 Montgomery Street 7th Floor San Francisco CITY STATE Depository, etc.)4