

SOCCI ELIZABETH A  
 Form 3  
 September 21, 2018

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*

SOCCI ELIZABETH A  
 (Last) (First) (Middle)

2. Date of Event Requiring Statement

(Month/Day/Year)  
 09/14/2018

3. Issuer Name and Ticker or Trading Symbol  
 CARPENTER TECHNOLOGY CORP [CRS]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original Filed(Month/Day/Year)

(Check all applicable)

Director  10% Owner  
 Officer  Other  
 (give title below) (specify below)  
 VP, Controller & Chf Acctg Off

C/O CARPENTER TECHNOLOGY CORPORATION, 1735 MARKET STREET, 15TH FLOOR

(Street)

PHILADELPHIA, PA 19103

(City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,618	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial
--	---	--	---------------	--------------	----------------------------------

Edgar Filing: SOCCI ELIZABETH A - Form 3

	(Month/Day/Year)		Derivative Security (Instr. 4)		or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Employee Stock Option	08/03/2016	08/03/2025	Common Stock	442	\$ 36.82	D	Â
Employee Stock Option	08/03/2017	08/03/2025	Common Stock	442	\$ 36.82	D	Â
Employee Stock Option	08/03/2018	08/03/2025	Common Stock	442	\$ 36.82	D	Â
Employee Stock Option	08/01/2017	08/01/2026	Common Stock	385	\$ 39.02	D	Â
Employee Stock Option	08/01/2018	08/01/2026	Common Stock	385	\$ 39.02	D	Â
Employee Stock Option	08/01/2019	08/01/2026	Common Stock	385	\$ 39.02	D	Â
Employee Stock Option	07/31/2018	07/31/2027	Common Stock	331	\$ 40.43	D	Â
Employee Stock Option	07/31/2019	07/31/2027	Common Stock	330	\$ 40.43	D	Â
Employee Stock Option	07/31/2020	07/31/2027	Common Stock	330	\$ 40.43	D	Â
Employee Stock Option	08/06/2019	08/06/2028	Common Stock	268	\$ 58.94	D	Â
Employee Stock Option	08/06/2020	08/06/2028	Common Stock	267	\$ 58.94	D	Â
Employee Stock Option	08/06/2021	08/06/2028	Common Stock	267	\$ 58.94	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
SOCCI ELIZABETH A C/O CARPENTER TECHNOLOGY CORPORATION 1735 MARKET STREET, 15TH FLOOR PHILADELPHIA, PA 19103	Â	Â	Â VP, Controller & Chf Acctg Off	Â

## Signatures

James D.  
Dee/POA

09/21/2018

\_\_Signature of  
Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.