

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084139	2 Total pages filed: 109
3 COMMITTEE NAME OneMain Holdings Inc. PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/14/2023	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 601 NW 2nd St. Evansville, IN 47708	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Ryan NICKNAME LAST SUFFIX Black	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 601 NW 2nd St. Evansville, IN 47708	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 601 NW 2nd St. Evansville, IN 47708	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (812) 492-2186	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME OneMain Holdings Inc. PAC	13 Filer ID (Ethics Commission Filers) 00084139
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 2,236.04
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 31,889.81
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 689.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 35,061.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Ryan Black

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 109

17 COMMITTEE NAME OneMain Holdings Inc. PAC		18 Filer ID (Ethics Commission Filers) 00084139
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 31,389.81
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 500.00
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 689.33
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/92 Rpt: 4/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Wilmington, DE 19805	
8 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/92 Rpt: 5/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Wilmington, DE 19805	
8 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		9 Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/92 Rpt: 6/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Wilmington, DE 19805	
8 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, Scott	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Charlottesville, VA 22901	
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Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
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	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.

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	6 Contributor address; City; State; Zip Code Charlottesville, VA 22901	
8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
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Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan	Amount of Contribution (\$) \$19.23
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4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Dan <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22901	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
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8 Principal occupation / Job title (See Instructions) Chief Compliance Officer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 05/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Chief Compliance Officer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Scott <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Chief Compliance Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 03/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Ryan <hr/> Contributor address; City; State; Zip Code Mills River, NC 28759	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/92 Rpt: 12/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchers, Brad	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Cook County, IL 60525		
8 Principal occupation / Job title (See Instructions) EVP Branch Operations		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	7 Amount of Contribution (\$) \$38.46
6 Contributor address; City; State; Zip Code Baltimore, MD 21202		
8 Principal occupation / Job title (See Instructions) Assoc Dir Communications		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/92 Rpt: 14/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Assoc Dir Communications		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
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Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Maggie <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Fin Systems Data & Info Deliver		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/92 Rpt: 15/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Fin Systems Data & Info Deliver		9 Employer (See Instructions) OneMain Holdings Inc.
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Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Zach <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Operations Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Zach <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chadha, Rajive <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) EVP Chief Operating Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chadha, Rajive <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
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	6 Contributor address; City; State; Zip Code Baton Rouge, LA 70806	
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Contributor address; City; State; Zip Code Purcellville, VA 20132		
Principal occupation / Job title (See Instructions) Assoc Dir Network Services		Employer (See Instructions) OneMain Holdings Inc.
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Principal occupation / Job title (See Instructions) Assoc Dir Network Services		Employer (See Instructions) OneMain Holdings Inc.
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Principal occupation / Job title (See Instructions) Assoc Dir Network Services		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coate, Tom	7 Amount of Contribution (\$) \$38.46
6 Contributor address; City; State; Zip Code Purcellville, VA 20132		
8 Principal occupation / Job title (See Instructions) Assoc Dir Network Services		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewan, Rohit	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Miami Beach, FL 33140		
Principal occupation / Job title (See Instructions) VP/SMD Loan Product Innovation		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewan, Rohit	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/SMD Loan Product Innovation		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$25.89
Principal occupation / Job title (See Instructions) Supv Network Ops		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$25.89
8 Principal occupation / Job title (See Instructions) Supv Network Ops		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$25.89
Principal occupation / Job title (See Instructions) Supv Network Ops		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$25.89
Principal occupation / Job title (See Instructions) Supv Network Ops		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$25.89
Principal occupation / Job title (See Instructions) Supv Network Ops		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$25.89
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Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$25.89
Principal occupation / Job title (See Instructions) Supv Network Ops		Employer (See Instructions) OneMain Holdings Inc.
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8 Principal occupation / Job title (See Instructions) Supv Network Ops		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Bob <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$11.54
Principal occupation / Job title (See Instructions) Supv Network Ops		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Lawrence <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) EVP Chief Tech Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Lawrence <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) EVP Chief Tech Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Lawrence <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) EVP Chief Tech Officer		Employer (See Instructions) OneMain Holdings Inc.

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Maggie <hr/> 6 Contributor address; City; State; Zip Code Owings, MD 20736	7 Amount of Contribution (\$) \$192.31
8 Principal occupation / Job title (See Instructions) VP/SMD Public Policy		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Maggie <hr/> Contributor address; City; State; Zip Code Owings, MD 20736	Amount of Contribution (\$) \$192.31
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Principal occupation / Job title (See Instructions) VP/SMD Public Policy		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy <hr/> Contributor address; City; State; Zip Code El Dorado Hills, CA 95762	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy <hr/> Contributor address; City; State; Zip Code El Dorado Hills, CA 95762	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.

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8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/92 Rpt: 44/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$96.15
8 Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/92 Rpt: 45/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$96.15
8 Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goyal, Dinesh <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) EVP Chief Credit Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/92 Rpt: 46/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	7 Amount of Contribution (\$) \$19.23
6 Contributor address; City; State; Zip Code Evansville, IN 47708		
8 Principal occupation / Job title (See Instructions) VP/SMD Software Dev		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/92 Rpt: 47/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/SMD Software Dev		9 Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/92 Rpt: 48/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	7 Amount of Contribution (\$) \$19.23
6 Contributor address; City; State; Zip Code Evansville, IN 47708		
8 Principal occupation / Job title (See Instructions) VP/SMD Software Dev		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain Holdings Inc.
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilchenstein, Mark	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) VP/SMD Cust Retention		Employer (See Instructions) OneMain Holdings Inc.
Date 02/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilchenstein, Mark	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) VP/SMD Cust Retention		Employer (See Instructions) OneMain Holdings Inc.
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilchenstein, Mark	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code Baltimore, MD 21202		
Principal occupation / Job title (See Instructions) VP/SMD Cust Retention		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilchenstein, Mark <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) VP/SMD Cust Retention		9 Employer (See Instructions) OneMain Holdings Inc.
Date 05/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilchenstein, Mark <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$175.00
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Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilchenstein, Mark <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) VP/SMD Cust Retention		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Chief of Staff		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Chief of Staff		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/SMD Chief of Staff		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/92 Rpt: 51/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/SMD Chief of Staff		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Chief of Staff		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/92 Rpt: 52/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Chief of Staff		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/92 Rpt: 53/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan	7 Amount of Contribution (\$) \$38.46
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Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.
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Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/92 Rpt: 54/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Gregg <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Deputy General Counsel		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/92 Rpt: 55/109
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4 Date 03/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
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Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/92 Rpt: 56/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) HRIS Mgr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/92 Rpt: 57/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle	7 Amount of Contribution (\$) \$19.23
6 Contributor address; City; State; Zip Code Cook County, IL 60525		
8 Principal occupation / Job title (See Instructions) Deputy General Counsel		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Cook County, IL 60525		
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Cook County, IL 60525		
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Cook County, IL 60525		
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Cook County, IL 60525		
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> 6 Contributor address; City; State; Zip Code Cook County, IL 60525	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Deputy General Counsel		9 Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.

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Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.

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Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code Hooksett, NH 03106	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) Assoc Dir Human Resources		Employer (See Instructions) OneMain Holdings Inc.
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4 Date 01/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Ashley <hr/> 6 Contributor address; City; State; Zip Code London, KY 40741	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Customer Care Mgr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Ashley <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$38.46
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Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Ashley <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Customer Care Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Ashley <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Customer Care Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Ron <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Head of Insurance		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	7 Amount of Contribution (\$) \$38.46
6 Contributor address; City; State; Zip Code New York, NY 10017		
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
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8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osterhout, Jenny <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) EVP Chief Strategy Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osterhout, Jenny <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) EVP Chief Strategy Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osterhout, Jenny <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) EVP Chief Strategy Officer		Employer (See Instructions) OneMain Holdings Inc.

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Date 05/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osterhout, Jenny	Amount of Contribution (\$) \$41.67
Contributor address; City; State; Zip Code New York, NY 10017		
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Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) EVP Chief Strategy Officer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, James	Amount of Contribution (\$) \$83.33
Contributor address; City; State; Zip Code Evansville, IN 47714		
Principal occupation / Job title (See Instructions) VP/SMD Architect/Technology Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, James	Amount of Contribution (\$) \$83.33
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Principal occupation / Job title (See Instructions) VP/SMD Architect/Technology Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Technology Software Engineer Sr		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Technology Software Engineer Sr		Employer (See Instructions) OneMain Holdings Inc.

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8 Principal occupation / Job title (See Instructions) Technology Software Engineer Sr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Technology Software Engineer Sr		Employer (See Instructions) OneMain Holdings Inc.
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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Technology Software Engineer Sr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 03/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Steubenville, OH 43952	
8 Principal occupation / Job title (See Instructions) Branch Mgr_11553		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Steubenville, OH 43952	
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Steubenville, OH 43952	
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Steubenville, OH 43952	
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Steubenville, OH 43952	
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8 Principal occupation / Job title (See Instructions) Branch Mgr_11553		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Steubenville, OH 43952		
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Steubenville, OH 43952		
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Steubenville, OH 43952		
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Technology Software Engineer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Washington, DC 20001	
8 Principal occupation / Job title (See Instructions) Technology Software Engineer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	Amount of Contribution (\$) \$19.23
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4 Date 06/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	7 Amount of Contribution (\$) \$19.23
6 Contributor address; City; State; Zip Code Washington, DC 20001		
8 Principal occupation / Job title (See Instructions) Technology Software Engineer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions) Technology Software Engineer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) SVP Treasurer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/92 Rpt: 79/109
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4 Date 05/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) SVP Treasurer		9 Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Dave <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/92 Rpt: 80/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweatt, Timothy <hr/> 6 Contributor address; City; State; Zip Code Fort Mill, SC 29715	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/D Collections		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweatt, Timothy <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Collections		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweatt, Timothy <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Collections		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweatt, Timothy <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Collections		Employer (See Instructions) OneMain Holdings Inc.
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Principal occupation / Job title (See Instructions) VP/D Collections		Employer (See Instructions) OneMain Holdings Inc.

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Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweatt, Timothy <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
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Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweatt, Timothy <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Collections		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 02/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/92 Rpt: 84/109
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4 Date 04/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) SVP Head of Compliance & Controls Proc		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.

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Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/92 Rpt: 87/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/19/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	7 Amount of Contribution (\$) \$19.23
6 Contributor address; City; State; Zip Code London, KY 40741		
8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code London, KY 40741		
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code London, KY 40741		
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
Contributor address; City; State; Zip Code London, KY 40741		
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Gahanna, OH 43230		
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/92 Rpt: 88/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha 6 Contributor address; City; State; Zip Code Gahanna, OH 43230	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/92 Rpt: 89/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha <hr/> 6 Contributor address; City; State; Zip Code Gahanna, OH 43230	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha <hr/> Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha <hr/> Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha <hr/> Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/92 Rpt: 90/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha <hr/> 6 Contributor address; City; State; Zip Code Gahanna, OH 43230	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Natasha <hr/> Contributor address; City; State; Zip Code Gahanna, OH 43230	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain Holdings Inc.
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/92 Rpt: 91/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> 6 Contributor address; City; State; Zip Code Webster, MN 55088	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/92 Rpt: 92/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> 6 Contributor address; City; State; Zip Code Webster, MN 55088	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code Webster, MN 55088	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/92 Rpt: 93/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	7 Amount of Contribution (\$) \$38.46
6 Contributor address; City; State; Zip Code Tempe, AZ 85282		
8 Principal occupation / Job title (See Instructions) Sales Mgr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 01/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/92 Rpt: 94/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	7 Amount of Contribution (\$) \$38.46
6 Contributor address; City; State; Zip Code Tempe, AZ 85282		
8 Principal occupation / Job title (See Instructions) Sales Mgr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/92 Rpt: 95/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	7 Amount of Contribution (\$) \$38.46
6 Contributor address; City; State; Zip Code Tempe, AZ 85282		
8 Principal occupation / Job title (See Instructions) Sales Mgr		9 Employer (See Instructions) OneMain Holdings Inc.
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.
Date 06/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaragoza, Adrian	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) Sales Mgr		Employer (See Instructions) OneMain Holdings Inc.

**NON-MONETARY SUPPORT FROM CORPORATION
OR LABOR ORGANIZATION**

SCHEDULE C4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C4: Sch: 1/1 Rpt: 96/109
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/30/2023	5 Corporation / Labor Organization name OneMain Holdings Inc.	6 Amount (\$) 500.00

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 97/109	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
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4 Date 01/27/2023	5 Payee name Atlantic Union Bank
-----------------------------	--

6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 East Cary St Richmond, VA 23219
--	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 03/07/2023	Payee name Atlantic Union Bank
--------------------	-----------------------------------

Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 East Cary St Richmond, VA 23219
---	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 03/27/2023	Payee name Atlantic Union Bank
--------------------	-----------------------------------

Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 East Cary St Richmond, VA 23219
---	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/12 Rpt: 98/109	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/03/2023	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 East Cary St Richmond, VA 23219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/21/2023	Candidate/Officeholder name Atlantic Union Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Atlantic Union Bank	
Office held	Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2023	Candidate/Officeholder name Atlantic Union Bank	
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Atlantic Union Bank	
Office held	Office held	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2023	Candidate/Officeholder name Atlantic Union Bank	
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Atlantic Union Bank	
Office held	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/12 Rpt: 99/109	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/17/2023	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 East Cary St Richmond, VA 23219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2023	Payee name Atlantic Union Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 East Cary St Richmond, VA 23219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Bank Service Charge	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/03/2023	Payee name North Carolina State Board of Elections	
Amount (\$) \$400.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 27255 Raleigh, NC 27611	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Filing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Not Applicable 2023 Filing Fee NC
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/07/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$0.92 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2023	Payee name PayPal Inc.	
Amount (\$) \$2.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/20/2023	Payee name PayPal Inc.	
Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/27/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$1.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/07/2023	Candidate/Officeholder name Payee name PayPal Inc.	
Amount (\$) \$0.92 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/17/2023	Candidate/Officeholder name Payee name PayPal Inc.	
Amount (\$) \$2.90 <input type="checkbox"/> Expenditure from corporate funds	Office sought Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/20/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/27/2023	Candidate/Officeholder name PayPal Inc.	
Amount (\$) \$1.69 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/07/2023	Candidate/Officeholder name PayPal Inc.	
Amount (\$) \$29.39 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
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4 Date 03/07/2023	5 Payee name PayPal Inc.
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6 Amount (\$) \$0.92 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/17/2023	Payee name PayPal Inc.
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Amount (\$) \$2.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/20/2023	Payee name PayPal Inc.
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Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/27/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$1.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/07/2023	Payee name PayPal Inc.	
Amount (\$) \$0.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/17/2023	Payee name PayPal Inc.	
Amount (\$) \$2.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/20/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/21/2023	Payee name PayPal Inc.	
Amount (\$) \$29.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/27/2023	Payee name PayPal Inc.	
Amount (\$) \$1.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/07/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$0.92 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 05/17/2023	Candidate/Officeholder name PayPal Inc.	
Amount (\$) \$2.90 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete ONLY if direct expenditure to benefit C/OH		
Date 05/20/2023	Candidate/Officeholder name PayPal Inc.	
Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete ONLY if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/27/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$1.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2023	Payee name PayPal Inc.	
Amount (\$) \$0.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2023	Payee name PayPal Inc.	
Amount (\$) \$29.39 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/12 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/20/2023	5 Payee name PayPal Inc.	
6 Amount (\$) \$5.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/27/2023	Candidate/Officeholder name PayPal Inc.	
Amount (\$) \$1.69 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 7022 Mountain View, CA 94039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PayPal fee for credit card contribution
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/13/2023	Candidate/Officeholder name Square Inc.	
Amount (\$) \$2.70 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1455 Market Street Suite 600 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Processing Fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Not Applicable 2023 Credit Card Processing Fee CA
Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

TEXT ANNOTATION

Sch: 1/1 Rpt: 109/109

FILER NAME

OneMain Holdings Inc. PAC

Filer ID (Ethics Commission Filers)

00084139

Schedule

Cover Sheet

Information entered by filer as a memo:

This balance may include other transactions not required to be reported per Ethics Advisory Opinion #208. Non-Texas and Federal disbursements during the reporting period total \$19,000.00.