

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: 210	
3 COMMITTEE NAME OneMain Holdings Inc. PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
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			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Ryan NICKNAME LAST SUFFIX Black			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	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 01/01/2025 THROUGH 06/30/2025			
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" 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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 42,361.75
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 45,640.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 96,583.68
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 210

17 COMMITTEE NAME OneMain Holdings Inc. PAC		18 Filer ID 00084139	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	42,361.75
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
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 type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	45,640.06
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	5,000.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/195 Rpt: 4/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Zain, Seif 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Policy Analyst Sr		9 Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Zain, Seif Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Policy Analyst Sr		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Zain, Seif Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Policy Analyst Sr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Zain, Seif Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Policy Analyst Sr		Employer (See Instructions) OneMain
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MONETARY POLITICAL CONTRIBUTIONS

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Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Zain, Seif <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Policy Analyst Sr		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler <hr/> Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

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Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler <hr/> Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler <hr/> Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler <hr/> Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, John <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, John <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
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SCHEDULE A1

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4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Quality Coordinator		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
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MONETARY POLITICAL CONTRIBUTIONS

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Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/195 Rpt: 16/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		9 Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/195 Rpt: 17/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, 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, Chief Compliance Officer		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/195 Rpt: 18/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, 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, Chief Compliance Officer		9 Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Ryan <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/195 Rpt: 19/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchers, Bradford <hr/> 6 Contributor address; City; State; Zip Code Cook County, IL 60525	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) EVP Branch Operations		9 Employer (See Instructions) OneMain
Date 03/21/2025	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 Delivery		Employer (See Instructions) OneMain
Date 04/18/2025	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 Delivery		Employer (See Instructions) OneMain
Date 05/30/2025	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 Delivery		Employer (See Instructions) OneMain
Date 06/27/2025	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 Delivery		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/195 Rpt: 20/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/21/2025	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
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Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery		Employer (See Instructions) OneMain
Date 01/10/2025	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 Delivery		Employer (See Instructions) OneMain
Date 03/07/2025	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 Delivery		Employer (See Instructions) OneMain
Date 01/24/2025	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 Delivery		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/195 Rpt: 21/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/04/2025	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 Delivery		9 Employer (See Instructions) OneMain
Date 05/02/2025	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 Delivery		Employer (See Instructions) OneMain
Date 02/07/2025	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 Delivery		Employer (See Instructions) OneMain
Date 05/16/2025	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 Delivery		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/195 Rpt: 22/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick 6 Contributor address; City; State; Zip Code Clayton, NC 27520-2282	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/195 Rpt: 23/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> 6 Contributor address; City; State; Zip Code Clayton, NC 27520-2282	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/195 Rpt: 24/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> 6 Contributor address; City; State; Zip Code Clayton, NC 27520-2282	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/195 Rpt: 25/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VP/D Fin Acctg		9 Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/195 Rpt: 26/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VP/D Fin Acctg		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/195 Rpt: 27/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <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/MD Product Suppt		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/195 Rpt: 28/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <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/MD Product Suppt		9 Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/195 Rpt: 29/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <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/MD Product Suppt		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/195 Rpt: 30/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Claffee, Lily <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$416.67
8 Principal occupation / Job title (See Instructions) Chief Legal Officer		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/195 Rpt: 31/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <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/MD Govt Relations		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/195 Rpt: 32/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <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/MD Govt Relations		9 Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 01/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Micah <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$416.67
Principal occupation / Job title (See Instructions) EVP Chief Operating Officer		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/195 Rpt: 33/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604-2934	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Interim Multi Branch Mgr		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Interim Multi Branch Mgr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Interim Multi Branch Mgr		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Interim Multi Branch Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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MONETARY POLITICAL CONTRIBUTIONS

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Principal occupation / Job title (See Instructions) Interim Multi Branch Mgr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Interim Multi Branch Mgr		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$3.85
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Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$3.85
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Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domboski, Jane <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chief Information Security Officer		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Product Adm Mgr		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Product Adm Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2487	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Product Adm Mgr		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Product Adm Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Product Adm Mgr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Product Adm Mgr		Employer (See Instructions) OneMain
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4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Mary <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2487	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Product Adm Mgr		9 Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$18.16
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Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
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Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain

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SCHEDULE A1

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Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/195 Rpt: 43/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$13.46
8 Principal occupation / Job title (See Instructions) Senior Engineer - Software		9 Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain

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Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/195 Rpt: 45/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$13.46
8 Principal occupation / Job title (See Instructions) Senior Engineer - Software		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$13.46
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/195 Rpt: 46/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Assoc General Counsel		9 Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/195 Rpt: 47/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Assoc General Counsel		9 Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/195 Rpt: 48/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embrey, Nathan 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) VP/D Engineer - Software		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/195 Rpt: 49/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		9 Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/195 Rpt: 50/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/195 Rpt: 51/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31
8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/195 Rpt: 52/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31
8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/195 Rpt: 53/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31
8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/195 Rpt: 54/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		9 Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/195 Rpt: 55/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Assoc Dir Quality Assur		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/195 Rpt: 56/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Paola <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) VP/MD, Impact		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/195 Rpt: 57/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/195 Rpt: 58/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/195 Rpt: 59/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) HRIS Analyst Sr		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain

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 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) HRIS Analyst Sr		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
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Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Policy Analyst Int		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
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8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 03/07/2025	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 (\$) <div style="text-align: right;">\$38.46</div>
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain
Date 01/24/2025	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 (\$) <div style="text-align: right;">\$38.46</div>
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain
Date 05/16/2025	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 (\$) <div style="text-align: right;">\$38.46</div>
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Date 03/21/2025	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 (\$) <div style="text-align: right;">\$38.46</div>
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Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Cara <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain

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Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Cara <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
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4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Cara <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75150	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Branch Mgr_11456		9 Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Cara <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/195 Rpt: 75/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$96.15
8 Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain

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SCHEDULE A1

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Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hedlund, Michael <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain

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4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Christopher <hr/> 6 Contributor address; City; State; Zip Code Charlotte, NC 28203-6584	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		9 Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain

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 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Rhonda <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/195 Rpt: 80/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain

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4 Date 03/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/195 Rpt: 82/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> 6 Contributor address; City; State; Zip Code Mathews, NC 28105	7 Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> 6 Contributor address; City; State; Zip Code Mathews, NC 28105	7 Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Natasha <hr/> 6 Contributor address; City; State; Zip Code Mathews, NC 28105	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
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Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
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4 Date 05/16/2025	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 10017-2452	7 Amount of Contribution (\$) \$38.46
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Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
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8 Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

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SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/195 Rpt: 89/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacera, Kelly <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$5.77
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacera, Kelly <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$5.77
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacera, Kelly <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$5.77
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacera, Kelly <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$5.77
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacera, Kelly <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$5.77
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacera, Kelly <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$5.77
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 01/24/2025	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

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 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/D Mktg Programs		9 Employer (See Instructions) OneMain
Date 05/02/2025	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
Date 03/07/2025	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
Date 06/27/2025	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
Date 03/21/2025	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/195 Rpt: 93/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/D Mktg Programs		9 Employer (See Instructions) OneMain
Date 06/13/2025	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
Date 05/30/2025	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
Date 01/10/2025	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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Date 02/21/2025	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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4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
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Date 02/07/2025	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
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/21/2025	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
Date 04/18/2025	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
Date 05/02/2025	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
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Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
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8 Principal occupation / Job title (See Instructions) Quant Analytics Ld		9 Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Yun <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Quant Analytics Ld		Employer (See Instructions) OneMain
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maass, Philippe <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Policy Analyst Int		Employer (See Instructions) OneMain
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maass, Philippe <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Policy Analyst Int		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Accounting Mgr		9 Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/195 Rpt: 103/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Accounting Mgr		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain

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Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Accounting Mgr		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Reymundo <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Finance Mgr		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Reymundo <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Finance Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew, Ciby <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Engineer - Platform		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew, Ciby <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
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Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew, Ciby <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Engineer - Platform		Employer (See Instructions) OneMain
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattern, Mark <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) VP/SMD Credit Cards		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattern, Mark <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) VP/SMD Credit Cards		9 Employer (See Instructions) OneMain
Date 03/07/2025	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
Date 02/07/2025	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
Date 06/13/2025	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
Date 01/10/2025	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
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Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/D Human Resources		Employer (See Instructions) OneMain

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Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) VP/D Human Resources		Employer (See Instructions) OneMain
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mark <hr/> Contributor address; City; State; Zip Code West Valley City, UT 84120	Amount of Contribution (\$) \$416.66
Principal occupation / Job title (See Instructions) VP/SMD, Auto		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
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Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/195 Rpt: 118/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia 6 Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley Contributor address; City; State; Zip Code Laurel, MS 39440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley Contributor address; City; State; Zip Code Laurel, MS 39440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley Contributor address; City; State; Zip Code Laurel, MS 39440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley Contributor address; City; State; Zip Code Laurel, MS 39440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/195 Rpt: 119/210
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4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley <hr/> 6 Contributor address; City; State; Zip Code Laurel, MS 39440	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley <hr/> Contributor address; City; State; Zip Code Laurel, MS 39440	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley <hr/> Contributor address; City; State; Zip Code Laurel, MS 39440	Amount of Contribution (\$) \$5.00
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SCHEDULE A1

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Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
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MONETARY POLITICAL CONTRIBUTIONS

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Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		9 Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Ronald <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
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$57.69
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/195 Rpt: 124/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/195 Rpt: 125/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
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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 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Network Ops Mgr		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Network Ops Mgr		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Network Ops Mgr		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$3.85
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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 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202	7 Amount of Contribution (\$) \$3.85
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Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olowofela, Oluwashikemi <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Accountant Ld		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olowofela, Oluwashikemi <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Accountant Ld		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olowofela, Oluwashikemi <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Accountant Ld		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/195 Rpt: 132/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olowofela, Oluwashikemi <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Accountant Ld		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/195 Rpt: 133/210
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Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 05/30/2025	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) Senior Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 04/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) Senior Engineer - Software		9 Employer (See Instructions) OneMain
Date 04/04/2025	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) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 05/16/2025	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) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 03/07/2025	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) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 06/13/2025	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
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Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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8 Principal occupation / Job title (See Instructions) Branch Mgr_11553		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Katie <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Jane <hr/> Contributor address; City; State; Zip Code Somerset, PA 15501	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Jane <hr/> Contributor address; City; State; Zip Code Somerset, PA 15501	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> 6 Contributor address; City; State; Zip Code Plainfield, IL 60585	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
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Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain

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8 Principal occupation / Job title (See Instructions) VP/MD Underwriting		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/195 Rpt: 147/210
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Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

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Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela <hr/> Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela <hr/> Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela <hr/> Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
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8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
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Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
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4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
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4 Date 03/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Katherine 6 Contributor address; City; State; Zip Code New York, NY 10017-2487	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Risk Analyst Ld		9 Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Katherine Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Risk Analyst Ld		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Katherine Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Risk Analyst Ld		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Katherine Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Risk Analyst Ld		Employer (See Instructions) OneMain
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8 Principal occupation / Job title (See Instructions) Risk Analyst Ld		9 Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Katherine <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Risk Analyst Ld		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneebaum, Joseph <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain

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4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$96.15
8 Principal occupation / Job title (See Instructions) SVP Treasurer		9 Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain

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Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
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Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$96.15
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain

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8 Principal occupation / Job title (See Instructions) SVP Treasurer		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain

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Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
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4 Date 03/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn <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/D Govt Relations		9 Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
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Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/195 Rpt: 176/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> 6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/195 Rpt: 177/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> 6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

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4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> 6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	7 Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$7.69</div>
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$7.69</div>
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$7.69</div>
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$7.69</div>
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Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 03/21/2025	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 Processes		Employer (See Instructions) OneMain
Date 03/07/2025	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 Processes		Employer (See Instructions) OneMain
Date 01/10/2025	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 Processes		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/195 Rpt: 184/210
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4 Date 04/18/2025	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 Processes		9 Employer (See Instructions) OneMain
Date 02/07/2025	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
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/195 Rpt: 185/210
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4 Date 02/21/2025	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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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/195 Rpt: 186/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
8 Principal occupation / Job title (See Instructions) Lead Engineer - Software		9 Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/195 Rpt: 190/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/195 Rpt: 191/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		9 Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/195 Rpt: 192/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		9 Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/195 Rpt: 193/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/195 Rpt: 194/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 03/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> 6 Contributor address; City; State; Zip Code London, KY 40741-7288	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain
Date 03/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/195 Rpt: 196/210
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8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

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 03/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon 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/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/195 Rpt: 198/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <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/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 01/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 199/210

2 FILER NAME

OneMain Holdings Inc. PAC

3 Filer ID (Ethics Commission Filers)
00084139

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

7 Pledgor Address; City; State; Zip Code

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 200/210
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: 1/9 Rpt: 201/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/20/2025	5 Payee name AMERICAN FINANCIAL SERVICES ASSOCIATION PAC	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1750 H Street NW #650 Washington, DC 20006-4600	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2025	Candidate/Officeholder name Atlantic Union Bank Office sought Office held	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Atlantic Union Bank Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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		
Date 01/23/2025	Candidate/Officeholder name Atlantic Union Bank Office sought Office held	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name Atlantic Union Bank Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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		

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: 2/9 Rpt: 202/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 05/07/2025	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$35.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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 05/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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		
Date 03/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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		

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: 3/9 Rpt: 203/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 02/19/2025	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 E Cary St Richmond, VA 23219-0019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(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 01/29/2025	Payee name Azinger for Senate	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1007 51st Street Vienna, WV 26105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2025	Payee name Barnhart for WV	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 215 Grant Street St. Marys, WV 26170	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
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: 4/9 Rpt: 204/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/29/2025	5 Payee name Committee to Elect JB Akers	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 815 Cedar Road Charleston, WV 25314	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2025	Payee name Committee to Elect Republican Women	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 12862 Raleigh, NC 27605	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2025	Payee name Committee to Elect Republican Women	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 12862 Raleigh, NC 27605	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
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: 5/9 Rpt: 205/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 06/27/2025	5 Payee name Consumer Credit Industry Association PAC (CCIA PAC)	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 974 Cambridge Drive Rocky Mount, NC 27804	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2025	Payee name Dave Sunday for AG	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 79 Harrisburg, PA 17108	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/20/2025	Payee name French Hill for Arkansas	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 M Street SE Suite 750 Washington, DC 20003-3798	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
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: 6/9 Rpt: 206/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/08/2025	5 Payee name Fry for Congress	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 100 M STREET SE SUITE 750 WASHINGTON DC, DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name HUIZENGA FOR CONGRESS		
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 254 ZEELAND, MI 49464-1509	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/07/2025	Candidate/Officeholder name Office sought Office held	
Payee name JEFFRIES FOR CONGRESS		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 65322 WASHINGTON, DC 20035	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
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: 7/9 Rpt: 207/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 04/24/2025	5 Payee name JEFFRIES FOR CONGRESS	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 65322 WASHINGTON, DC 20035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2025	Payee name Jack Johnson for State Senate	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 915 Lewisburg Pk Franklin, TN 37064-5729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2025	Payee name Maass, Philippe	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 100 International Dr Baltimore, TX 21202	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Refund of Contribution	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund of Contribution
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: 8/9 Rpt: 208/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/29/2025	5 Payee name Mike for WV Committee	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11 Southcove Lane South Charleston, WV 25309	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/24/2025	Payee name Morgan McGarvey for Congress	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 5324 Louisville, KY 40255	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2025	Payee name PayPal Inc.	
Amount (\$) \$12.53 <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) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
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: 9/9 Rpt: 209/210	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 01/04/2025	5 Payee name PayPal Inc.	
6 Amount (\$) \$12.53 <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) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2025	Payee name Thom Tillis Committee	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 97396 Raleigh, NC 27624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/13/2025	Payee name Tomorrow Is Meaningful PAC	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1110 Trinity Drive Alexandria, VA 22314-4722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 210/210

2 FILER NAME

OneMain Holdings Inc. PAC

3 Filer ID (Ethics Commission Filers)
00084139

4 Date

05/09/2025

5 Name of person from whom amount is received

Jeffries for Congress

8 Amount (\$)

\$5,000.00

6 Address of person from whom amount is received; City; State; Zip Code

WASHINGTON, DC 20035

7 Purpose for which amount is received

Void of 5/7/2025 Contribution

☐ Check if political contribution returned to filer