

**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) 00083099	2 Total pages filed: 78
3 COMMITTEE NAME Gainwell Holding Corp. Political Action Committee		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/14/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 5615 High Point Drive Irving, TX 75038			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 5615 High Point Drive Irving, TX 75038		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 5615 High Point Drive Irving, TX 75038		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (732) 556-7248		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input 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 07/01/2025	Day	Year
	THROUGH 12/31/2025		
11 ELECTION	Month Day Year	ELECTION DATE	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

GO TO PAGE 2

**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Gainwell Holding Corp. Political Action Committee		13 FILER ID (Ethics Commission Filers) 00083099
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)	\$ 120,855.82
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 123,057.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>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.</p> <p style="text-align: right;">_____ Vineet Gupta Signature of Campaign Treasurer</p>		
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 78

17 COMMITTEE NAME Gainwell Holding Corp. Political Action Committee	18 FILER ID (Ethics Commission Filers) 00083099
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 120,855.82	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input 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 type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ 572.57	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/73 Rpt: 4/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
8 Principal occupation / Job title (See Instructions) Executive Vice President, Sales		9 Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/73 Rpt: 5/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
8 Principal occupation / Job title (See Instructions) Executive Vice President, Sales		9 Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Arrington, TN 37014-1423	
Principal occupation / Job title (See Instructions) Executive Vice President, Sales		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 3/73 Rpt: 6/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, William	7 Amount of Contribution (\$) \$0.07	
	6 Contributor address; City; State; Zip Code Arrington, TN 37014-1423		
8 Principal occupation / Job title (See Instructions) Executive Vice President, Sales		9 Employer (See Instructions) Gainwell Technologies	
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Jeff	Amount of Contribution (\$) \$2,500.00	
	Contributor address; City; State; Zip Code Byrdstown, TN 38549-4675		
Principal occupation / Job title (See Instructions) Director, Client Delivery Leader		Employer (See Instructions) Gainwell Technologies LLC	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45	
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509		
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45	
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509		
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45	
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509		
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/73 Rpt: 7/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	7 Amount of Contribution (\$) \$444.45
	6 Contributor address; City; State; Zip Code Victoria, MN 55386-4509	
8 Principal occupation / Job title (See Instructions) Vice President, Product Management		9 Employer (See Instructions) Gainwell Technologies LLC
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509	
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509	
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509	
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert	Amount of Contribution (\$) \$444.45
	Contributor address; City; State; Zip Code Victoria, MN 55386-4509	
Principal occupation / Job title (See Instructions) Vice President, Product Management		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/73 Rpt: 8/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behler, Robert 6 Contributor address; City; State; Zip Code Victoria, MN 55386-4509	7 Amount of Contribution (\$) \$444.45
8 Principal occupation / Job title (See Instructions) Vice President, Product Management		9 Employer (See Instructions) Gainwell Technologies LLC
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bierman, Jennifer Contributor address; City; State; Zip Code Austin, TX 78737-4768	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyer, Brandon Contributor address; City; State; Zip Code Conway, AR 72034-7781	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	Amount of Contribution (\$) \$384.61
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	Amount of Contribution (\$) \$384.61
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/73 Rpt: 9/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
8 Principal occupation / Job title (See Instructions) SVP, Population Health Management		9 Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/73 Rpt: 10/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
8 Principal occupation / Job title (See Instructions) SVP, Population Health Management		9 Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bristow, Kathleen	Amount of Contribution (\$) \$0.07
	Contributor address; City; State; Zip Code Hermosa Beach, CA 90254-2270	
Principal occupation / Job title (See Instructions) SVP, Population Health Management		Employer (See Instructions) Gainwell Technologies
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110	
Principal occupation / Job title (See Instructions) SVP, Sector General Manager		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 8/73 Rpt: 11/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane	7 Amount of Contribution (\$) \$384.61	
	6 Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110		
8 Principal occupation / Job title (See Instructions) SVP, Sector General Manager		9 Employer (See Instructions) Gainwell Technologies	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110		
Principal occupation / Job title (See Instructions) SVP, Sector General Manager		Employer (See Instructions) Gainwell Technologies	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110		
Principal occupation / Job title (See Instructions) SVP, Sector General Manager		Employer (See Instructions) Gainwell Technologies	
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110		
Principal occupation / Job title (See Instructions) SVP, Sector General Manager		Employer (See Instructions) Gainwell Technologies	
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110		
Principal occupation / Job title (See Instructions) SVP, Sector General Manager		Employer (See Instructions) Gainwell Technologies	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/73 Rpt: 12/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane 6 Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110	7 Amount of Contribution (\$) \$384.61
	8 Principal occupation / Job title (See Instructions) SVP, Sector General Manager	9 Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110	Amount of Contribution (\$) \$384.61
	Principal occupation / Job title (See Instructions) SVP, Sector General Manager	Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110	Amount of Contribution (\$) \$384.61
	Principal occupation / Job title (See Instructions) SVP, Sector General Manager	Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110	Amount of Contribution (\$) \$384.61
	Principal occupation / Job title (See Instructions) SVP, Sector General Manager	Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jane Contributor address; City; State; Zip Code Southern Pines, NC 28387-2110	Amount of Contribution (\$) \$0.07
	Principal occupation / Job title (See Instructions) SVP, Sector General Manager	Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/73 Rpt: 13/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
8 Principal occupation / Job title (See Instructions) Chief Medical Officer		9 Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/73 Rpt: 14/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
8 Principal occupation / Job title (See Instructions) Chief Medical Officer		9 Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
Principal occupation / Job title (See Instructions) Chief Medical Officer		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/73 Rpt: 15/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Call, Gary	7 Amount of Contribution (\$) \$0.07
	6 Contributor address; City; State; Zip Code South Jordan, UT 84095-5951	
8 Principal occupation / Job title (See Instructions) Chief Medical Officer		9 Employer (See Instructions) Health Management Systems
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/73 Rpt: 16/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	7 Amount of Contribution (\$) \$230.76
	6 Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
8 Principal occupation / Job title (See Instructions) Account General Manager		9 Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/73 Rpt: 17/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	7 Amount of Contribution (\$) \$230.76
	6 Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
8 Principal occupation / Job title (See Instructions) Account General Manager		9 Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Malcolm	Amount of Contribution (\$) \$0.12
	Contributor address; City; State; Zip Code Indian River, MI 49749-9633	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204	
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204	
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204	
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 15/73 Rpt: 18/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee				3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	7 Amount of Contribution (\$) \$555.56		
	6 Contributor address; City; State; Zip Code Long Grove, IL 60047-5204			
8 Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		9 Employer (See Instructions) Gainwell Technologies LLC		
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56		
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204			
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC		
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56		
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204			
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC		
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56		
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204			
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC		
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	Amount of Contribution (\$) \$555.56		
	Contributor address; City; State; Zip Code Long Grove, IL 60047-5204			
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		Employer (See Instructions) Gainwell Technologies LLC		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 16/73 Rpt: 19/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael	7 Amount of Contribution (\$) \$555.56	
	6 Contributor address; City; State; Zip Code Long Grove, IL 60047-5204		
8 Principal occupation / Job title (See Instructions) Executive Vice President, Chief Operations Officer		9 Employer (See Instructions) Gainwell Technologies LLC	
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costalas, Steve	Amount of Contribution (\$) \$5,000.00	
	Contributor address; City; State; Zip Code Naples, FL 34110-9134		
Principal occupation / Job title (See Instructions) Executive Vice President, Chief Legal Officer and Secretar		Employer (See Instructions) Gainwell Technologies LLC	
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Douglas	Amount of Contribution (\$) \$1,500.00	
	Contributor address; City; State; Zip Code Macomb, MI 48042-5668		
Principal occupation / Job title (See Instructions) Director, Client Delivery Leader		Employer (See Instructions) Gainwell Technologies LLC	
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76	
	Contributor address; City; State; Zip Code Boise, ID 83716-8839		
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76	
	Contributor address; City; State; Zip Code Boise, ID 83716-8839		
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/73 Rpt: 20/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	7 Amount of Contribution (\$) \$230.76
	6 Contributor address; City; State; Zip Code Boise, ID 83716-8839	
8 Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		9 Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/73 Rpt: 21/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	7 Amount of Contribution (\$) \$230.76
	6 Contributor address; City; State; Zip Code Boise, ID 83716-8839	
8 Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		9 Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$230.76
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daharwal, Harsh	Amount of Contribution (\$) \$0.12
	Contributor address; City; State; Zip Code Boise, ID 83716-8839	
Principal occupation / Job title (See Instructions) Director, Delivery Shared Services		Employer (See Instructions) Gainwell Technologies
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decrevel, Johnny	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code East Helena, MT 59635-3158	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/73 Rpt: 22/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith 6 Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	7 Amount of Contribution (\$) \$333.33
8 Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		9 Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/73 Rpt: 23/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith 6 Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	7 Amount of Contribution (\$) \$333.33
8 Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		9 Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	Amount of Contribution (\$) \$333.33
Principal occupation / Job title (See Instructions) Vice President, State Government Solutions		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		
2 FILER NAME Gainwell Holding Corp. Political Action Committee		1 Total pages Schedule A1: Sch: 21/73 Rpt: 24/78
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Seana Smith 6 Contributor address; City; State; Zip Code Upper Arlington, OH 43220-4530	3 Filer ID (Ethics Commission Filers) 00083099 7 Amount of Contribution (\$) \$0.04
	8 Principal occupation / Job title (See Instructions) Vice President, State Government Solutions	
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James Contributor address; City; State; Zip Code Marietta, GA 30062-1471	Amount of Contribution (\$) \$92.31
	Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James Contributor address; City; State; Zip Code Marietta, GA 30062-1471	Amount of Contribution (\$) \$92.31
	Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James Contributor address; City; State; Zip Code Marietta, GA 30062-1471	Amount of Contribution (\$) \$92.31
	Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James Contributor address; City; State; Zip Code Marietta, GA 30062-1471	Amount of Contribution (\$) \$92.31
	Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 22/73 Rpt: 25/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	7 Amount of Contribution (\$) \$92.31	
	6 Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
8 Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		9 Employer (See Instructions) Health Management Systems	
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	Amount of Contribution (\$) \$92.31	
	Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		Employer (See Instructions) Health Management Systems	
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	Amount of Contribution (\$) \$92.31	
	Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		Employer (See Instructions) Health Management Systems	
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	Amount of Contribution (\$) \$92.31	
	Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		Employer (See Instructions) Health Management Systems	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	Amount of Contribution (\$) \$92.31	
	Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		Employer (See Instructions) Health Management Systems	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 23/73 Rpt: 26/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	7 Amount of Contribution (\$) \$92.31	
	6 Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
8 Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		9 Employer (See Instructions) Health Management Systems	
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	Amount of Contribution (\$) \$92.31	
	Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		Employer (See Instructions) Health Management Systems	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, James	Amount of Contribution (\$) \$92.31	
	Contributor address; City; State; Zip Code Marietta, GA 30062-1471		
Principal occupation / Job title (See Instructions) Vice President, State Govt Solutions		Employer (See Instructions) Health Management Systems	
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992		
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992		
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 24/73 Rpt: 27/78	
2 FILER NAME Gainwell Holding Corp. Political Action Committee				3 Filer ID (Ethics Commission Filers) 00083099	
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	7 Amount of Contribution (\$) \$384.61			
	6 Contributor address; City; State; Zip Code Parkland, FL 33076-2992				
8 Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		9 Employer (See Instructions) Health Management Systems			
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61			
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992				
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems			
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61			
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992				
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems			
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61			
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992				
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems			
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61			
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992				
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/73 Rpt: 28/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Parkland, FL 33076-2992	
8 Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		9 Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992	
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992	
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Gregory	Amount of Contribution (\$) \$0.07
	Contributor address; City; State; Zip Code Parkland, FL 33076-2992	
Principal occupation / Job title (See Instructions) Senior Vice President, Coordination of Benefits		Employer (See Instructions) Health Management Systems
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph	Amount of Contribution (\$) \$454.54
	Contributor address; City; State; Zip Code Waltham, MA 02451-2313	
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/73 Rpt: 29/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph 6 Contributor address; City; State; Zip Code Waltham, MA 02451-2313	7 Amount of Contribution (\$) \$454.54
8 Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		9 Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/73 Rpt: 30/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph 6 Contributor address; City; State; Zip Code Waltham, MA 02451-2313	7 Amount of Contribution (\$) \$454.54
8 Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		9 Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$454.54
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraser, Joseph Contributor address; City; State; Zip Code Waltham, MA 02451-2313	Amount of Contribution (\$) \$0.06
Principal occupation / Job title (See Instructions) Sr VP, Sector Lead		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/73 Rpt: 31/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
8 Principal occupation / Job title (See Instructions) Chief Growth Officer		9 Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/73 Rpt: 32/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
8 Principal occupation / Job title (See Instructions) Chief Growth Officer		9 Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
Principal occupation / Job title (See Instructions) Chief Growth Officer		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/73 Rpt: 33/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Nathan	7 Amount of Contribution (\$) \$0.07
	6 Contributor address; City; State; Zip Code Elk River, MN 55330-8607	
8 Principal occupation / Job title (See Instructions) Chief Growth Officer		9 Employer (See Instructions) Gainwell Technologies
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	
Principal occupation / Job title (See Instructions) Director of Sales Solution		Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	
Principal occupation / Job title (See Instructions) Director of Sales Solution		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	
Principal occupation / Job title (See Instructions) Director of Sales Solution		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	
Principal occupation / Job title (See Instructions) Director of Sales Solution		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/73 Rpt: 34/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	7 Amount of Contribution (\$) \$192.30
	8 Principal occupation / Job title (See Instructions) Director of Sales Solution	9 Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Director of Sales Solution	Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Director of Sales Solution	Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Director of Sales Solution	Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	Amount of Contribution (\$) \$192.30
	Principal occupation / Job title (See Instructions) Director of Sales Solution	Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/73 Rpt: 35/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	
8 Principal occupation / Job title (See Instructions) Director of Sales Solution		9 Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grier, Donald	Amount of Contribution (\$) \$0.10
	Contributor address; City; State; Zip Code Cedar Park, TX 78613-7575	
Principal occupation / Job title (See Instructions) Director of Sales Solution		Employer (See Instructions) Gainwell Technologies
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hablutzel, Margo Lynn	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Durham, NC 27703-8123	
Principal occupation / Job title (See Instructions) Associate General Counsel		Employer (See Instructions) Gainwell Technologies
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/73 Rpt: 36/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	7 Amount of Contribution (\$) \$307.69
	6 Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
8 Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		9 Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/73 Rpt: 37/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	7 Amount of Contribution (\$) \$307.69
	6 Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
8 Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		9 Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$307.69
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, David	Amount of Contribution (\$) \$0.03
	Contributor address; City; State; Zip Code Vandalia, OH 45377-9688	
Principal occupation / Job title (See Instructions) Vice President, Chief Pharmacist		Employer (See Instructions) Gainwell Technologies
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodge Thompson, Talecia	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Marietta, GA 30064-4674	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/73 Rpt: 38/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael	7 Amount of Contribution (\$) \$111.11
	6 Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	
8 Principal occupation / Job title (See Instructions) Program Management, Senior Principal		9 Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael	Amount of Contribution (\$) \$111.11
	Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	
Principal occupation / Job title (See Instructions) Program Management, Senior Principal		Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael	Amount of Contribution (\$) \$111.11
	Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	
Principal occupation / Job title (See Instructions) Program Management, Senior Principal		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael	Amount of Contribution (\$) \$111.11
	Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	
Principal occupation / Job title (See Instructions) Program Management, Senior Principal		Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael	Amount of Contribution (\$) \$111.11
	Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	
Principal occupation / Job title (See Instructions) Program Management, Senior Principal		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/73 Rpt: 39/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael 6 Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	7 Amount of Contribution (\$) \$111.11
	8 Principal occupation / Job title (See Instructions) Program Management, Senior Principal	9 Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	Amount of Contribution (\$) \$111.11
	Principal occupation / Job title (See Instructions) Program Management, Senior Principal	Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	Amount of Contribution (\$) \$111.11
	Principal occupation / Job title (See Instructions) Program Management, Senior Principal	Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	Amount of Contribution (\$) \$111.11
	Principal occupation / Job title (See Instructions) Program Management, Senior Principal	Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hostetler, Michael Contributor address; City; State; Zip Code Croton On Hudson, NY 10520-3124	Amount of Contribution (\$) \$0.01
	Principal occupation / Job title (See Instructions) Program Management, Senior Principal	Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 37/73 Rpt: 40/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	7 Amount of Contribution (\$) \$192.30	
	6 Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
8 Principal occupation / Job title (See Instructions) VP, Risk Management		9 Employer (See Instructions) Health Management Systems	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 38/73 Rpt: 41/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	7 Amount of Contribution (\$) \$192.30	
	6 Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
8 Principal occupation / Job title (See Instructions) VP, Risk Management		9 Employer (See Instructions) Health Management Systems	
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinson, Henri	Amount of Contribution (\$) \$192.30	
	Contributor address; City; State; Zip Code Elkhorn, WI 53121-2871		
Principal occupation / Job title (See Instructions) VP, Risk Management		Employer (See Instructions) Health Management Systems	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/73 Rpt: 42/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knickrehm, Mark	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Rancho Santa Fe, CA 92067-2407	
8 Principal occupation / Job title (See Instructions) Chairman and CEO		9 Employer (See Instructions) Gainwell Technologies LLC
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labrie, Thomas	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Readfield, ME 04355-3381	
Principal occupation / Job title (See Instructions) Director, Service Delivery		Employer (See Instructions) Gainwell Technologies LLC
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Amy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Bedford Hills, NY 10507-2302	
Principal occupation / Job title (See Instructions) Vice President, Deputy General Counsel		Employer (See Instructions) Gainwell Technologies LLC
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/73 Rpt: 43/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
8 Principal occupation / Job title (See Instructions) Director, Case Management		9 Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/73 Rpt: 44/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
8 Principal occupation / Job title (See Instructions) Director, Case Management		9 Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopiccolo, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Scottsdale, AZ 85260-7284	
Principal occupation / Job title (See Instructions) Director, Case Management		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 42/73 Rpt: 45/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason	7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code Denver, CO 80211-2903		
8 Principal occupation / Job title (See Instructions) Vice President, Production Manager		9 Employer (See Instructions) Gainwell Technologies LLC	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Denver, CO 80211-2903		
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Denver, CO 80211-2903		
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Denver, CO 80211-2903		
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC	
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Denver, CO 80211-2903		
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/73 Rpt: 46/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason 6 Contributor address; City; State; Zip Code Denver, CO 80211-2903	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Vice President, Production Manager		9 Employer (See Instructions) Gainwell Technologies LLC
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason Contributor address; City; State; Zip Code Denver, CO 80211-2903	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason Contributor address; City; State; Zip Code Denver, CO 80211-2903	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason Contributor address; City; State; Zip Code Denver, CO 80211-2903	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marby, Mason Contributor address; City; State; Zip Code Denver, CO 80211-2903	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Vice President, Production Manager		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/73 Rpt: 47/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	7 Amount of Contribution (\$) \$138.46
	6 Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
8 Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		9 Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/73 Rpt: 48/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	7 Amount of Contribution (\$) \$138.46
	6 Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
8 Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		9 Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	Amount of Contribution (\$) \$138.46
	Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/73 Rpt: 49/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jeffrey	7 Amount of Contribution (\$) \$0.02
	6 Contributor address; City; State; Zip Code Alexandria, VA 22314-1390	
8 Principal occupation / Job title (See Instructions) Application Architect, Senior Principal		9 Employer (See Instructions) Gainwell Technologies
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/73 Rpt: 50/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	7 Amount of Contribution (\$) \$4.62
	6 Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
8 Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		9 Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/73 Rpt: 51/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	7 Amount of Contribution (\$) \$4.62
	6 Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
8 Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		9 Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Eric	Amount of Contribution (\$) \$4.62
	Contributor address; City; State; Zip Code Las Vegas, NV 89108-5908	
Principal occupation / Job title (See Instructions) Mgr,Data Cust & Analytics		Employer (See Instructions) Health Management Systems
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	Amount of Contribution (\$) \$5.42
	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
Principal occupation / Job title (See Instructions) Senior Professional Application Designer		Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	Amount of Contribution (\$) \$5.42
	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
Principal occupation / Job title (See Instructions) Senior Professional Application Designer		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/73 Rpt: 52/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	7 Amount of Contribution (\$) \$5.42
	6 Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
8 Principal occupation / Job title (See Instructions) Senior Professional Application Designer		9 Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	Amount of Contribution (\$) \$5.42
	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
Principal occupation / Job title (See Instructions) Senior Professional Application Designer		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	Amount of Contribution (\$) \$5.42
	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
Principal occupation / Job title (See Instructions) Senior Professional Application Designer		Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	Amount of Contribution (\$) \$5.42
	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
Principal occupation / Job title (See Instructions) Senior Professional Application Designer		Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemarano, Robert	Amount of Contribution (\$) \$5.42
	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	
Principal occupation / Job title (See Instructions) Senior Professional Application Designer		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 50/73 Rpt: 53/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor Montemarano, Robert	6 Contributor address; City; State; Zip Code Edison, NJ 08820-2623	7 Amount of Contribution (\$) \$5.42
	8 Principal occupation / Job title (See Instructions) Senior Professional Application Designer		
9 Employer (See Instructions) Health Management Systems			
Date 11/14/2025	Full name of contributor Montemarano, Robert	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	Amount of Contribution (\$) \$5.42
	Principal occupation / Job title (See Instructions) Senior Professional Application Designer		
Employer (See Instructions) Health Management Systems			
Date 11/28/2025	Full name of contributor Montemarano, Robert	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	Amount of Contribution (\$) \$5.42
	Principal occupation / Job title (See Instructions) Senior Professional Application Designer		
Employer (See Instructions) Health Management Systems			
Date 12/15/2025	Full name of contributor Montemarano, Robert	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	Amount of Contribution (\$) \$5.42
	Principal occupation / Job title (See Instructions) Senior Professional Application Designer		
Employer (See Instructions) Health Management Systems			
Date 12/31/2025	Full name of contributor Montemarano, Robert	Contributor address; City; State; Zip Code Edison, NJ 08820-2623	Amount of Contribution (\$) \$5.42
	Principal occupation / Job title (See Instructions) Senior Professional Application Designer		
Employer (See Instructions) Health Management Systems			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/73 Rpt: 54/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Caryn	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Ashburn, VA 20148-7189	
8 Principal occupation / Job title (See Instructions) Vice President, Contracts Management		9 Employer (See Instructions) Gainwell Technologies LLC
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/73 Rpt: 55/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	7 Amount of Contribution (\$) \$333.33
	6 Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
8 Principal occupation / Job title (See Instructions) Account General Manager		9 Employer (See Instructions) Gainwell Technologies LLC
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$333.33
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/73 Rpt: 56/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	7 Amount of Contribution (\$) \$333.33
	6 Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
8 Principal occupation / Job title (See Instructions) Account General Manager		9 Employer (See Instructions) Gainwell Technologies LLC
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oser, Carolyn	Amount of Contribution (\$) \$0.04
	Contributor address; City; State; Zip Code Jersey City, NJ 07306-2791	
Principal occupation / Job title (See Instructions) Account General Manager		Employer (See Instructions) Gainwell Technologies LLC
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne	Amount of Contribution (\$) \$0.20
	Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	
Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review		Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne	Amount of Contribution (\$) \$0.20
	Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	
Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review		Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne	Amount of Contribution (\$) \$0.20
	Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	
Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/73 Rpt: 57/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne 6 Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	7 Amount of Contribution (\$) \$0.20
	8 Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	9 Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/73 Rpt: 58/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne 6 Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	7 Amount of Contribution (\$) \$0.20
	8 Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	9 Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piniones, Leanne Contributor address; City; State; Zip Code Las Vegas, NV 89178-3524	Amount of Contribution (\$) \$0.20
	Principal occupation / Job title (See Instructions) Associate Manager, Clinical Review	Employer (See Instructions) Health Management Systems
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preddy, Marshall Contributor address; City; State; Zip Code Austin, TX 78750-2613	Amount of Contribution (\$) \$3,000.00
	Principal occupation / Job title (See Instructions) Senior Director, Associate General Counsel and Corporate P	Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 56/73 Rpt: 59/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roenfeldt, Den	7 Amount of Contribution (\$) \$384.61	
	6 Contributor address; City; State; Zip Code Evergreen, CO 80439-8613		
8 Principal occupation / Job title (See Instructions) SVP, Chief Assurance Officer		9 Employer (See Instructions) Gainwell Technologies	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roenfeldt, Den	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Evergreen, CO 80439-8613		
Principal occupation / Job title (See Instructions) SVP, Chief Assurance Officer		Employer (See Instructions) Gainwell Technologies	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roenfeldt, Den	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Evergreen, CO 80439-8613		
Principal occupation / Job title (See Instructions) SVP, Chief Assurance Officer		Employer (See Instructions) Gainwell Technologies	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roenfeldt, Den	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Evergreen, CO 80439-8613		
Principal occupation / Job title (See Instructions) SVP, Chief Assurance Officer		Employer (See Instructions) Gainwell Technologies	
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roenfeldt, Den	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Evergreen, CO 80439-8613		
Principal occupation / Job title (See Instructions) SVP, Chief Assurance Officer		Employer (See Instructions) Gainwell Technologies	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/73 Rpt: 60/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roenfeldt, Den	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Evergreen, CO 80439-8613	
8 Principal occupation / Job title (See Instructions) SVP, Chief Assurance Officer		9 Employer (See Instructions) Gainwell Technologies
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Oded	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Ridgewood, NJ 07450-2610	
Principal occupation / Job title (See Instructions) Vice President, Financial Reporting		Employer (See Instructions) Gainwell Technologies LLC
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/73 Rpt: 61/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Golden, CO 80403-1162	
8 Principal occupation / Job title (See Instructions) Attorney, Senior Principal		9 Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/73 Rpt: 62/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Golden, CO 80403-1162	
8 Principal occupation / Job title (See Instructions) Attorney, Senior Principal		9 Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Jeffries, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Golden, CO 80403-1162	
Principal occupation / Job title (See Instructions) Attorney, Senior Principal		Employer (See Instructions) Health Management Systems
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/73 Rpt: 63/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
8 Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		9 Employer (See Instructions) Health Management Systems
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/73 Rpt: 64/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
8 Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		9 Employer (See Instructions) Health Management Systems
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voelkel, Brian	Amount of Contribution (\$) \$0.10
	Contributor address; City; State; Zip Code Iselin, NJ 08830-2453	
Principal occupation / Job title (See Instructions) Senior Director, Carrier Optimization		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/73 Rpt: 65/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
8 Principal occupation / Job title (See Instructions) Vice President, Sales		9 Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/73 Rpt: 66/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	7 Amount of Contribution (\$) \$192.30
	6 Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
8 Principal occupation / Job title (See Instructions) Vice President, Sales		9 Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	Amount of Contribution (\$) \$192.30
	Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
Principal occupation / Job title (See Instructions) Vice President, Sales		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/73 Rpt: 67/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wacker, Charles	7 Amount of Contribution (\$) \$0.10
	6 Contributor address; City; State; Zip Code Stillwater, MN 55082-7581	
8 Principal occupation / Job title (See Instructions) Vice President, Sales		9 Employer (See Instructions) Gainwell Technologies
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang	Amount of Contribution (\$) \$416.66
	Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	
Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions		Employer (See Instructions) Gainwell Technologies LLC
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang	Amount of Contribution (\$) \$416.66
	Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	
Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions		Employer (See Instructions) Gainwell Technologies LLC
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang	Amount of Contribution (\$) \$416.66
	Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	
Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions		Employer (See Instructions) Gainwell Technologies LLC
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang	Amount of Contribution (\$) \$416.66
	Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	
Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions		Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/73 Rpt: 68/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang 6 Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	7 Amount of Contribution (\$) \$416.66
	8 Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	9 Employer (See Instructions) Gainwell Technologies LLC
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	Amount of Contribution (\$) \$416.66
	Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	Employer (See Instructions) Gainwell Technologies LLC
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	Amount of Contribution (\$) \$416.66
	Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	Employer (See Instructions) Gainwell Technologies LLC
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	Amount of Contribution (\$) \$416.66
	Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	Employer (See Instructions) Gainwell Technologies LLC
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	Amount of Contribution (\$) \$416.66
	Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	Employer (See Instructions) Gainwell Technologies LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/73 Rpt: 69/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang 6 Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	7 Amount of Contribution (\$) \$416.66
	8 Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	9 Employer (See Instructions) Gainwell Technologies LLC
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Yinxiang Contributor address; City; State; Zip Code Kildeer, IL 60047-1848	Amount of Contribution (\$) \$0.08
	Principal occupation / Job title (See Instructions) Chief AI Officer, SVP, AI solutions	Employer (See Instructions) Gainwell Technologies LLC
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	Amount of Contribution (\$) \$384.61
	Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager	Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	Amount of Contribution (\$) \$384.61
	Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager	Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	Amount of Contribution (\$) \$384.61
	Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager	Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/73 Rpt: 70/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	
8 Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		9 Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	
Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		Employer (See Instructions) Gainwell Technologies
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	
Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	
Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Sacramento, CA 95811-1107	
Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 68/73 Rpt: 71/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee			3 Filer ID (Ethics Commission Filers) 00083099
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	7 Amount of Contribution (\$) \$384.61	
	6 Contributor address; City; State; Zip Code Sacramento, CA 95811-1107		
8 Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		9 Employer (See Instructions) Gainwell Technologies	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	Amount of Contribution (\$) \$384.61	
	Contributor address; City; State; Zip Code Sacramento, CA 95811-1107		
Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		Employer (See Instructions) Gainwell Technologies	
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekes, Monica	Amount of Contribution (\$) \$0.07	
	Contributor address; City; State; Zip Code Sacramento, CA 95811-1107		
Principal occupation / Job title (See Instructions) Senior Vice President, Sector General Manager		Employer (See Instructions) Gainwell Technologies	
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435		
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00	
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435		
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/73 Rpt: 72/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
8 Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		9 Employer (See Instructions) Health Management Systems
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/73 Rpt: 73/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
8 Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		9 Employer (See Instructions) Health Management Systems
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Dena	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010-6435	
Principal occupation / Job title (See Instructions) Sr. Director, Acct Management		Employer (See Instructions) Health Management Systems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/73 Rpt: 74/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 07/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Concord, MA 01742-2319	
8 Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		9 Employer (See Instructions) Gainwell Technologies
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/73 Rpt: 75/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	7 Amount of Contribution (\$) \$384.61
	6 Contributor address; City; State; Zip Code Concord, MA 01742-2319	
8 Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		9 Employer (See Instructions) Gainwell Technologies
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan	Amount of Contribution (\$) \$384.61
	Contributor address; City; State; Zip Code Concord, MA 01742-2319	
Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		Employer (See Instructions) Gainwell Technologies

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/73 Rpt: 76/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthy, Susan 6 Contributor address; City; State; Zip Code Concord, MA 01742-2319	7 Amount of Contribution (\$) \$0.07
8 Principal occupation / Job title (See Instructions) SVP, Chief Marketing Officer		9 Employer (See Instructions) Gainwell Technologies

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/2 Rpt: 77/78</p>
<p>2 FILER NAME Gainwell Holding Corp. Political Action Committee</p>		<p>3 Filer ID (Ethics Commission Filers) 00083099</p>
<p>4 Date 07/31/2025</p>	<p>5 Name of person from whom amount is received JP Morgan Chase Bank, NA</p>	<p>8 Amount (\$) \$48.70</p>
	<p>6 Address of person from whom amount is received; City; State; Zip Code New York, NY 10038</p>	
	<p>7 Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 08/29/2025</p>	<p>Name of person from whom amount is received JP Morgan Chase Bank, NA</p>	<p>Amount (\$) \$89.53</p>
	<p>Address of person from whom amount is received; City; State; Zip Code New York, NY 10038</p>	
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 09/30/2025</p>	<p>Name of person from whom amount is received JP Morgan Chase Bank, NA</p>	<p>Amount (\$) \$97.83</p>
	<p>Address of person from whom amount is received; City; State; Zip Code New York, NY 10038</p>	
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 10/31/2025</p>	<p>Name of person from whom amount is received JP Morgan Chase Bank, NA</p>	<p>Amount (\$) \$110.30</p>
	<p>Address of person from whom amount is received; City; State; Zip Code New York, NY 10038</p>	
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/28/2025</p>	<p>Name of person from whom amount is received JP Morgan Chase Bank, NA</p>	<p>Amount (\$) \$112.36</p>
	<p>Address of person from whom amount is received; City; State; Zip Code New York, NY 10038</p>	
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer

**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: 2/2 Rpt: 78/78
2 FILER NAME Gainwell Holding Corp. Political Action Committee		3 Filer ID (Ethics Commission Filers) 00083099
4 Date 12/31/2025	5 Name of person from whom amount is received JP Morgan Chase Bank, NA 6 Address of person from whom amount is received; City; State; Zip Code New York, NY 10038	8 Amount (\$) \$113.85
	7 Purpose for which amount is received Interest	<input type="checkbox"/> Check if political contribution returned to filer