

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084139	2 Total pages filed: 217			
3 COMMITTEE NAME OneMain Holdings Inc. PAC		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 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 601 NW 2nd St. Evansville, IN 47708						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.			FIRST Ryan	MI	
	NICKNAME	LAST Black	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 601 NW 2nd St. Evansville, IN 47708		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 601 NW 2nd St. Evansville, IN 47708					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (812) 492-2186					
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	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month 11/03/2026	Day	Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME OneMain Holdings Inc. PAC		13 FILER ID (Ethics Commission Filers) 00084139
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)	\$ 64,407.49
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 66,880.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 95,861.17
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>Mr. Ryan Black _____ 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 217

17 COMMITTEE NAME OneMain Holdings Inc. PAC	18 Filer ID (Ethics Commission Filers) 00084139
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input checked="" 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 checked="" type="checkbox"/> SCHEDULE E: LOANS	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
11. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
12. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
13. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/196 Rpt: 4/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Fargo, ND 58103	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Fargo, ND 58103	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/196 Rpt: 6/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Fargo, ND 58103	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Fargo, ND 58103	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, John	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailer, John	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		Employer (See Instructions) OneMain

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8 Principal occupation / Job title (See Instructions) VP/SMD Loan Servicing		9 Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	7 Amount of Contribution (\$) \$5.00
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) Quality Coordinator		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		9 Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain

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4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Daniel	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/196 Rpt: 15/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Mathews, NC 28105	
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/196 Rpt: 16/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Mathews, NC 28105	
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mathews, NC 28105	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/196 Rpt: 17/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
8 Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/196 Rpt: 18/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boys, Margaret	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc Dir Communications		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
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	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: Sch: 18/196 Rpt: 21/217</p>
<p>2 FILER NAME OneMain Holdings Inc. PAC</p>			<p>3 Filer ID (Ethics Commission Filers) 00084139</p>
<p>4 Date 09/19/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael</p>	<p>6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673</p>	<p>7 Amount of Contribution (\$) \$38.46</p>
<p>8 Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery</p>		<p>9 Employer (See Instructions) OneMain</p>	
<p>Date 07/11/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael</p>	<p>Contributor address; City; State; Zip Code Baltimore, MD 21202-4673</p>	<p>Amount of Contribution (\$) \$38.46</p>
<p>Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery</p>		<p>Employer (See Instructions) OneMain</p>	
<p>Date 08/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael</p>	<p>Contributor address; City; State; Zip Code Baltimore, MD 21202-4673</p>	<p>Amount of Contribution (\$) \$38.46</p>
<p>Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery</p>		<p>Employer (See Instructions) OneMain</p>	
<p>Date 10/31/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael</p>	<p>Contributor address; City; State; Zip Code Baltimore, MD 21202-4673</p>	<p>Amount of Contribution (\$) \$38.46</p>
<p>Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery</p>		<p>Employer (See Instructions) OneMain</p>	
<p>Date 10/03/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael</p>	<p>Contributor address; City; State; Zip Code Baltimore, MD 21202-4673</p>	<p>Amount of Contribution (\$) \$38.46</p>
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<p> </p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 19/196 Rpt: 22/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael	7 Amount of Contribution (\$) \$38.46	
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
8 Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery		9 Employer (See Instructions) OneMain	
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery		Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick	Amount of Contribution (\$) \$3.85	
	Contributor address; City; State; Zip Code Clayton, NC 27520-2282		
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick	Amount of Contribution (\$) \$3.85	
	Contributor address; City; State; Zip Code Clayton, NC 27520-2282		
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick	Amount of Contribution (\$) \$3.85	
	Contributor address; City; State; Zip Code Clayton, NC 27520-2282		
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/196 Rpt: 23/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick 6 Contributor address; City; State; Zip Code Clayton, NC 27520-2282	7 Amount of Contribution (\$) \$3.85
	8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations	9 Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/196 Rpt: 24/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick 6 Contributor address; City; State; Zip Code Clayton, NC 27520-2282	7 Amount of Contribution (\$) \$3.85
	8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations	9 Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/196 Rpt: 25/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronner, Philip	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code New York, NY 10017-2422	
8 Principal occupation / Job title (See Instructions) Board Director		9 Employer (See Instructions) OneMain Holdings, Inc.
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/196 Rpt: 26/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) VP/D Fin Acctg		9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/196 Rpt: 27/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VP/D Fin Acctg		9 Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/196 Rpt: 28/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Fort Mill, SC 29715	
8 Principal occupation / Job title (See Instructions) VP/MD Product Suppt		9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/196 Rpt: 30/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Fort Mill, SC 29715	
8 Principal occupation / Job title (See Instructions) VP/MD Product Suppt		9 Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Fort Mill, SC 29715	
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Phyllis	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code New York, NY 10017-2422	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) OneMain Holdings, Inc.
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Lee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code West Valley City, UT 84120-8210	
Principal occupation / Job title (See Instructions) Strategic Advisor		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Lee	Amount of Contribution (\$) \$96.15
	Contributor address; City; State; Zip Code West Valley City, UT 84120-8210	
Principal occupation / Job title (See Instructions) Strategic Advisor		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/196 Rpt: 31/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cellier, Emily	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) Assoc General Counsel		9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cellier, Emily	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cellier, Emily	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cellier, Emily	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 29/196 Rpt: 32/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva	7 Amount of Contribution (\$) \$38.46	
	6 Contributor address; City; State; Zip Code New York, NY 10017-2452		
8 Principal occupation / Job title (See Instructions) VP/MD Human Resources		9 Employer (See Instructions) OneMain	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017-2452		
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017-2452		
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017-2452		
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017-2452		
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/196 Rpt: 33/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
	8 Principal occupation / Job title (See Instructions) VP/MD Human Resources	9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Human Resources	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Human Resources	Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Human Resources	Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Human Resources	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/196 Rpt: 34/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
	8 Principal occupation / Job title (See Instructions) VP/MD Human Resources	9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Human Resources	Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Govt Relations	Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Govt Relations	Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Govt Relations	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/196 Rpt: 35/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/MD Govt Relations		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 33/196 Rpt: 36/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	7 Amount of Contribution (\$) \$38.46	
	6 Contributor address; City; State; Zip Code New York, NY 10017		
8 Principal occupation / Job title (See Instructions) VP/MD Govt Relations		9 Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain	
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/196 Rpt: 37/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daruvala, Toos	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code New York, NY 10017-2422	
8 Principal occupation / Job title (See Instructions) Board Director		9 Employer (See Instructions) OneMain Holdings, Inc.
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/196 Rpt: 38/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Longview, TX 75604-2934	
8 Principal occupation / Job title (See Instructions) Branch Mgr_11456		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/196 Rpt: 39/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Longview, TX 75604-2934	
8 Principal occupation / Job title (See Instructions) Branch Mgr_11456		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Stephanie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Longview, TX 75604-2934	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 37/196 Rpt: 40/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46	
	8 Principal occupation / Job title (See Instructions) VP/MD Treasury	9 Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury	Employer (See Instructions) OneMain	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury	Employer (See Instructions) OneMain	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury	Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury	Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/196 Rpt: 41/217	
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46	
	8 Principal occupation / Job title (See Instructions) VP/MD Treasury		
9 Employer (See Instructions) OneMain	Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/196 Rpt: 42/217	
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46	
	8 Principal occupation / Job title (See Instructions) VP/MD Treasury		
9 Employer (See Instructions) OneMain	Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/196 Rpt: 43/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$3.85
	8 Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics	9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics	Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics	Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics	Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/196 Rpt: 44/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		9 Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/SMD Risk Analytics		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/196 Rpt: 45/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	7 Amount of Contribution (\$) \$18.16
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) Manager - Platform		9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/196 Rpt: 46/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	7 Amount of Contribution (\$) \$18.16
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) Manager - Platform		9 Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 44/196 Rpt: 47/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	7 Amount of Contribution (\$) \$18.16	
	6 Contributor address; City; State; Zip Code Evansville, IN 47708		
8 Principal occupation / Job title (See Instructions) Manager - Platform		9 Employer (See Instructions) OneMain	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16	
	Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert	Amount of Contribution (\$) \$18.16	
	Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain	
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	Amount of Contribution (\$) \$13.46	
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	Amount of Contribution (\$) \$13.46	
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/196 Rpt: 48/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	7 Amount of Contribution (\$) \$13.46
	8 Principal occupation / Job title (See Instructions) Senior Engineer - Software	9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$13.46
	Principal occupation / Job title (See Instructions) Senior Engineer - Software	Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$13.46
	Principal occupation / Job title (See Instructions) Senior Engineer - Software	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$13.46
	Principal occupation / Job title (See Instructions) Senior Engineer - Software	Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$13.46
	Principal occupation / Job title (See Instructions) Senior Engineer - Software	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 46/196 Rpt: 49/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	7 Amount of Contribution (\$) \$13.46	
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
8 Principal occupation / Job title (See Instructions) Senior Engineer - Software		9 Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	Amount of Contribution (\$) \$13.46	
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain	
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	Amount of Contribution (\$) \$13.46	
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	Amount of Contribution (\$) \$13.46	
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	Amount of Contribution (\$) \$13.46	
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain	

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SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 47/196 Rpt: 50/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary	7 Amount of Contribution (\$) \$13.46	
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615		
8 Principal occupation / Job title (See Instructions) Senior Engineer - Software		9 Employer (See Instructions) OneMain	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain	
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/196 Rpt: 51/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
8 Principal occupation / Job title (See Instructions) Assoc General Counsel		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/196 Rpt: 52/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
8 Principal occupation / Job title (See Instructions) Assoc General Counsel		9 Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/196 Rpt: 53/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	7 Amount of Contribution (\$) \$12.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/196 Rpt: 54/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	7 Amount of Contribution (\$) \$12.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/196 Rpt: 55/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	7 Amount of Contribution (\$) \$12.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felderhoff, Gerald	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Lawrence	Amount of Contribution (\$) \$192.31
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) EVP Chief Tech Officer		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret	Amount of Contribution (\$) \$192.31
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret	Amount of Contribution (\$) \$192.31
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/196 Rpt: 56/217	
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31	
	8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		
9 Employer (See Instructions) OneMain	Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31	
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31	
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31	
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/196 Rpt: 57/217	
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31	
	8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		
9 Employer (See Instructions) OneMain	Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31	
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.25	
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31	
	Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/196 Rpt: 58/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret	7 Amount of Contribution (\$) \$192.31
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/196 Rpt: 59/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	7 Amount of Contribution (\$) \$4.00
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/D Ops Support		9 Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/196 Rpt: 60/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	7 Amount of Contribution (\$) \$4.00
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/D Ops Support		9 Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Irving, TX 75062-2354	
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
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	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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	6 Contributor address; City; State; Zip Code Irving, TX 75062-2354	
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/196 Rpt: 63/217
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4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Irving, TX 75062-2354	
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Irving, TX 75062-2354	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs-Dixon, Marsha 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$3.85
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Principal occupation / Job title (See Instructions) HRIS Analyst Sr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/196 Rpt: 66/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code New York, NY 10017-2487	
8 Principal occupation / Job title (See Instructions) Assoc Dir Govt Relations		9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017-2487	
Principal occupation / Job title (See Instructions) Assoc Dir Govt Relations		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017-2487	
Principal occupation / Job title (See Instructions) Assoc Dir Govt Relations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017-2487	
Principal occupation / Job title (See Instructions) Assoc Dir Govt Relations		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017-2487	
Principal occupation / Job title (See Instructions) Assoc Dir Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
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8 Principal occupation / Job title (See Instructions) Assoc Dir Govt Relations		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
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	6 Contributor address; City; State; Zip Code New York, NY 10017	
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	7 Amount of Contribution (\$) \$27.00
	6 Contributor address; City; State; Zip Code New York, NY 10017	
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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
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Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Danville, KY 40422	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/196 Rpt: 70/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Danville, KY 40422	
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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
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Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
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Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
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	Contributor address; City; State; Zip Code Danville, KY 40422	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Danville, KY 40422	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Danville, KY 40422	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Danville, KY 40422	
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	Contributor address; City; State; Zip Code Danville, KY 40422	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grefer, Jonathan	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Danville, KY 40422	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guthrie, Roy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code New York, NY 10017-2422	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) OneMain Holdings, Inc.
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halmy, Christopher	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code New York, NY 10017-2422	
Principal occupation / Job title (See Instructions) Board Director		Employer (See Instructions) OneMain Holdings, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/196 Rpt: 73/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) VP/SMD Software Dev		9 Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) VP/SMD Software Dev		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$38.46
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$38.46
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8 Principal occupation / Job title (See Instructions) VP/SMD Software Dev		9 Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$38.46
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip	Amount of Contribution (\$) \$38.46
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SCHEDULE A1

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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Cara	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Mesquite, TX 75150-4030	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Cara	Amount of Contribution (\$) \$5.00
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	6 Contributor address; City; State; Zip Code Irving, TX 75062-2354	
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Principal occupation / Job title (See Instructions) SVP Principal Acctg Ofc		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Quality Control Assur Mgr		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa	Amount of Contribution (\$) \$5.00
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9 Employer (See Instructions) OneMain	Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
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SCHEDULE A1

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SCHEDULE A1

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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Rhonda Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Rhonda Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
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SCHEDULE A1

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Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain

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	Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Evansville, IN 47708		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/196 Rpt: 88/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus	Amount of Contribution (\$) \$38.46
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8 Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		9 Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus	Amount of Contribution (\$) \$38.46
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	Contributor address; City; State; Zip Code New York, NY 10017-2452	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$38.46	
	8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		
9 Employer (See Instructions) OneMain	Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

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	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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	8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		
9 Employer (See Instructions) OneMain	Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGassa, David Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$1,000.00	
	Principal occupation / Job title (See Instructions) VP/SMD Data Science & Analytics		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
	8 Principal occupation / Job title (See Instructions) VP/D Mktg Programs	9 Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs	Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs	Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs	Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46	
	8 Principal occupation / Job title (See Instructions) VP/D Mktg Programs		
9 Employer (See Instructions) OneMain	Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46	
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/196 Rpt: 96/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
	8 Principal occupation / Job title (See Instructions) VP/D Mktg Programs	9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) VP/D Mktg Programs	Employer (See Instructions) OneMain
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Gregg Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain

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SCHEDULE A1

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4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina 6 Contributor address; City; State; Zip Code Aberdeen, NC 28315	7 Amount of Contribution (\$) \$3.85
	8 Principal occupation / Job title (See Instructions) Branch Mgr_11553	9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
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	8 Principal occupation / Job title (See Instructions) Branch Mgr_11553	9 Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
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	6 Contributor address; City; State; Zip Code Aberdeen, NC 28315	
8 Principal occupation / Job title (See Instructions) Branch Mgr_11553		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macdonald, Andy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code New York, NY 10017-2422	
Principal occupation / Job title (See Instructions) Board Director		Employer (See Instructions) OneMain Holdings, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/196 Rpt: 102/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee 6 Contributor address; City; State; Zip Code Irving, TX 75062-2354	7 Amount of Contribution (\$) \$9.62
	8 Principal occupation / Job title (See Instructions) Accounting Mgr	9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$9.62
	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$9.62
	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$9.62
	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$9.62
	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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	8 Principal occupation / Job title (See Instructions) Accounting Mgr	9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$9.62
	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Lee Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$9.62
	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
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	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
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	Principal occupation / Job title (See Instructions) Accounting Mgr	Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Reymundo Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Finance Mgr	Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Reymundo Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Finance Mgr	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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MONETARY POLITICAL CONTRIBUTIONS

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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew, Ciby	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/MD Engineer - Platform		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew, Ciby	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/MD Engineer - Platform		Employer (See Instructions) OneMain
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	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) VP/MD Engineer - Platform		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Cook County, IL 60525	
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle 6 Contributor address; City; State; Zip Code Cook County, IL 60525	7 Amount of Contribution (\$) \$19.23
	8 Principal occupation / Job title (See Instructions) Deputy General Counsel	9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain

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SCHEDULE A1

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	8 Principal occupation / Job title (See Instructions) Deputy General Counsel	9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
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	Principal occupation / Job title (See Instructions) Deputy General Counsel	Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly 6 Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) VP/D Human Resources	Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly 6 Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mark	7 Amount of Contribution (\$) \$416.66
	6 Contributor address; City; State; Zip Code West Valley City, UT 84120	
8 Principal occupation / Job title (See Instructions) VP/SMD, Auto		9 Employer (See Instructions) OneMain
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mark	Amount of Contribution (\$) \$416.66
	Contributor address; City; State; Zip Code West Valley City, UT 84120	
Principal occupation / Job title (See Instructions) VP/SMD, Auto		Employer (See Instructions) OneMain
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mark	Amount of Contribution (\$) \$416.66
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/196 Rpt: 117/217
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4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor Mobley, Davia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Hinesville, GA 31313-4447		
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain	
Date 10/31/2025	Full name of contributor Mobley, Davia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447		
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain	
Date 07/11/2025	Full name of contributor Mobley, Davia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447		
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Date 12/26/2025	Full name of contributor Mobley, Davia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Hinesville, GA 31313-4447		
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain	
Date 09/19/2025	Full name of contributor Moss, Ashley	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Laurel, MS 39440-1834		
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

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	6 Contributor address; City; State; Zip Code Laurel, MS 39440-1834				
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain			
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley	Amount of Contribution (\$) \$5.00			
	Contributor address; City; State; Zip Code Laurel, MS 39440-1834				
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain			
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley	Amount of Contribution (\$) \$5.00			
	Contributor address; City; State; Zip Code Laurel, MS 39440-1834				
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain			
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Ashley	Amount of Contribution (\$) \$5.00			
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266		
Principal occupation / Job title (See Instructions) VP/SMD Marketing Analytics		Employer (See Instructions) OneMain	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James	Amount of Contribution (\$) \$3.85	
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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 121/196 Rpt: 124/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	7 Amount of Contribution (\$) \$57.69	
	6 Contributor address; City; State; Zip Code New York, NY 10017-2452		
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain	
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	Amount of Contribution (\$) \$57.69	
	Contributor address; City; State; Zip Code New York, NY 10017-2452		
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	Amount of Contribution (\$) \$57.69	
	Contributor address; City; State; Zip Code New York, NY 10017-2452		
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	Amount of Contribution (\$) \$57.69
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Warren	Amount of Contribution (\$) \$57.69
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Network		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Network		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/196 Rpt: 127/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$3.85
	8 Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Network	9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Network	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Network	Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
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	Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Network		Employer (See Instructions) OneMain
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/196 Rpt: 131/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Washington, DC 20001	
8 Principal occupation / Job title (See Instructions) VP/D Communications		9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Opelika, AL 36801-6196	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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	8 Principal occupation / Job title (See Instructions) Branch Mgr_11456	9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
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8 Principal occupation / Job title (See Instructions) Branch Mgr_11456		9 Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Senior Engineer - Software		Employer (See Instructions) OneMain

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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pentapati, Ravina Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) Senior Engineer - Software	Employer (See Instructions) OneMain
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	Principal occupation / Job title (See Instructions) Senior Engineer - Software	Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain

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	8 Principal occupation / Job title (See Instructions) Branch Mgr_11553	9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Katie	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Katie	Amount of Contribution (\$) \$19.23	
	Contributor address; City; State; Zip Code New York, NY 10017		
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8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Jane Contributor address; City; State; Zip Code Somerset, PA 15501	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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	Principal occupation / Job title (See Instructions) Branch Mgr_10156	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Branch Mgr_10156	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
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Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/196 Rpt: 146/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando 6 Contributor address; City; State; Zip Code Plainfield, IL 60585	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/196 Rpt: 147/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Plainfield, IL 60585	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tempe, AZ 85282	
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tempe, AZ 85282	
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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia	Amount of Contribution (\$) \$3.85
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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	Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain	
Date 11/28/2025	Full name of contributor Rangel, Elia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor Rangel, Elia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tempe, AZ 85282		
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor Rangel, Elia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$3.85
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tempe, AZ 85282	
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/196 Rpt: 150/217	
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$19.23	
	8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		
9 Employer (See Instructions) OneMain	Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23	
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23	
	Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/196 Rpt: 151/217	
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139	
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$19.23	
	8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		
9 Employer (See Instructions) OneMain	Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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SCHEDULE A1

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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Brandon	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
Principal occupation / Job title (See Instructions) Senior Assoc General Counsel		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah	Amount of Contribution (\$) \$19.23
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SCHEDULE A1

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	Principal occupation / Job title (See Instructions) Senior Assoc General Counsel	Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$19.23
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	Principal occupation / Job title (See Instructions) Senior Assoc General Counsel	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/196 Rpt: 155/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	7 Amount of Contribution (\$) \$9.62
	6 Contributor address; City; State; Zip Code Paris, TX 75462-5206	
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Paris, TX 75462-5206	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Paris, TX 75462-5206	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Paris, TX 75462-5206	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Paris, TX 75462-5206	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	7 Amount of Contribution (\$) \$9.62
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Paris, TX 75462-5206	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Paris, TX 75462-5206	
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela	Amount of Contribution (\$) \$9.62
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SCHEDULE A1

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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain

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SCHEDULE A1

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	8 Principal occupation / Job title (See Instructions) Engineer - Software		
9 Employer (See Instructions) OneMain	Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Engineer - Software		
Employer (See Instructions) OneMain	Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Engineer - Software		
Employer (See Instructions) OneMain	Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Engineer - Software		
Employer (See Instructions) OneMain	Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Engineer - Software		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 156/196 Rpt: 159/217
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4 Date 07/11/2025	5 Full name of contributor Santosuoso, John	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code New York, NY 10017		
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain	
Date 11/14/2025	Full name of contributor Santosuoso, John	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	
Date 12/26/2025	Full name of contributor Santosuoso, John	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor Santosuoso, John	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	
Date 09/19/2025	Full name of contributor Santosuoso, John	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code New York, NY 10017		
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain	

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4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuoso, John	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	Amount of Contribution (\$) \$115.38
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	Amount of Contribution (\$) \$115.38
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	Amount of Contribution (\$) \$115.38
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/196 Rpt: 161/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	7 Amount of Contribution (\$) \$115.38
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	Amount of Contribution (\$) \$115.38
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	Amount of Contribution (\$) \$115.38
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Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard	Amount of Contribution (\$) \$115.38
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David	Amount of Contribution (\$) \$115.38
	Contributor address; City; State; Zip Code New York, NY 10017-2452	
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain

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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Pearland, TX 77584-8466	
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Pearland, TX 77584-8466	
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Pearland, TX 77584-8466	
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MONETARY POLITICAL CONTRIBUTIONS

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MONETARY POLITICAL CONTRIBUTIONS

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	8 Principal occupation / Job title (See Instructions) Branch Mgr_11456	9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda Contributor address; City; State; Zip Code Pearland, TX 77584-8466	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Richard	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code New York, NY 10017-2422	
8 Principal occupation / Job title (See Instructions) Board Director		9 Employer (See Instructions) OneMain Holdings, Inc.
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	
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MONETARY POLITICAL CONTRIBUTIONS

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	Principal occupation / Job title (See Instructions) Branch Mgr_11553	Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
	Principal occupation / Job title (See Instructions) Dist Mgr	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael	Amount of Contribution (\$) \$19.23			
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Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/196 Rpt: 175/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/D Govt Relations		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/196 Rpt: 176/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/196 Rpt: 177/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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	6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Mount Vernon, IL 62864	
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/196 Rpt: 179/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	7 Amount of Contribution (\$) \$7.69
	6 Contributor address; City; State; Zip Code New York, NY 10017	
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	7 Amount of Contribution (\$) \$7.69
	6 Contributor address; City; State; Zip Code New York, NY 10017	
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/196 Rpt: 181/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Sandra	7 Amount of Contribution (\$) \$7.69
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		9 Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/196 Rpt: 182/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$3.85
	8 Principal occupation / Job title (See Instructions) Area Sales Rep Sr	9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Area Sales Rep Sr	Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Area Sales Rep Sr	Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Area Sales Rep Sr	Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Area Sales Rep Sr	Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/196 Rpt: 183/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Area Sales Rep Sr		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Area Sales Rep Sr		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 181/196 Rpt: 184/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	7 Amount of Contribution (\$) \$38.46	
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
8 Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		9 Employer (See Instructions) OneMain	
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 182/196 Rpt: 185/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	7 Amount of Contribution (\$) \$38.46	
	6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
8 Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		9 Employer (See Instructions) OneMain	
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain	
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain	
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Baltimore, MD 21202-4673		
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SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$38.46
	8 Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes	9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
	Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes	Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Lead Engineer - Software	Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Lead Engineer - Software	Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
	Principal occupation / Job title (See Instructions) Lead Engineer - Software	Employer (See Instructions) OneMain

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SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) Lead Engineer - Software		9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Evansville, IN 47708	
8 Principal occupation / Job title (See Instructions) Lead Engineer - Software		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Evansville, IN 47708	
Principal occupation / Job title (See Instructions) Lead Engineer - Software		Employer (See Instructions) OneMain

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
8 Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 187/196 Rpt: 190/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	7 Amount of Contribution (\$) \$38.46	
	6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266		
8 Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		9 Employer (See Instructions) OneMain	
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266		
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266		
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain	
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266		
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain	
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46	
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266		
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/196 Rpt: 191/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
8 Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		9 Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/196 Rpt: 192/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	7 Amount of Contribution (\$) \$9.62
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code New York, NY 10017	
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/196 Rpt: 193/217
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/196 Rpt: 194/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian	7 Amount of Contribution (\$) \$9.62
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code London, KY 40741-7288	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code London, KY 40741-7288	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/196 Rpt: 196/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	7 Amount of Contribution (\$) \$19.23
	6 Contributor address; City; State; Zip Code London, KY 40741-7288	
8 Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code London, KY 40741-7288	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code London, KY 40741-7288	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey	Amount of Contribution (\$) \$19.23
	Contributor address; City; State; Zip Code London, KY 40741-7288	
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/196 Rpt: 197/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
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	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
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	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/196 Rpt: 198/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	7 Amount of Contribution (\$) \$38.46
	6 Contributor address; City; State; Zip Code New York, NY 10017	
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon	Amount of Contribution (\$) \$38.46
	Contributor address; City; State; Zip Code New York, NY 10017	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 196/196 Rpt: 199/217
2 FILER NAME OneMain Holdings Inc. PAC			3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46	
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain	
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46	
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain	

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.			
2 FILER NAME OneMain Holdings Inc. PAC			
4 TOTAL OF UNITEMIZED PLEDGES \$ 0.00			
5 Date	6 Full name of pledgor 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$)	9 In-kind description (If applicable)
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 201/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/17/2025	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$15.00	7 Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/23/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/24/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/05/2025	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$15.00	7 Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/21/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/30/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

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1 Total pages Schedule F1: Sch: 3/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/30/2025	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$15.00	7 Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/30/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/09/2025	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$35.00	7 Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/30/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/28/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/30/2025	5 Payee name Atlantic Union Bank	
6 Amount (\$) \$15.00	7 Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/01/2025	Payee name Atlantic Union Bank	Office held
Amount (\$) \$15.00	Payee address; City; 1051 E Cary St Richmond, VA 23219-0019	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/02/2025	Payee name Azinger for State Senate	Office held
Amount (\$) \$1,000.00	Payee address; City; 1007 51st Street Vienna, WV 26105-3143	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/19/2025	5 Payee name BANKS FOR SENATE	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO BOX 11431 FORT WAYNE, IN 46858	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 12/02/2025	Payee name Barnhart for WV	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 215 Grant Street Saint Marys, WV 26170-1217	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 11/12/2025	Payee name CHAVEZ FOR OHIO	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 4679 WINTERSET DRIVE Columbus, OH 43220-8113	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/02/2025	5 Payee name Charnock for WV	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 31 Charleston, WV 25321-0031	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Committee to Elect Clay Riley	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 3002 Dogwood Road Bridgeport, WV 26330-9395	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name Committee to Elect John Paul Hott II	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 207 North Main Street Petersburg, WV 26847	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 12/02/2025	5 Payee name Committee to Elect Vernon Criss	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 1652 Parkersburg, WV 26102-1652	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Committee to Elect Walter Hall WV	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 1201 Saint Albans, WV 25177-1201	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name FRIENDS OF BILL DEMORA	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 545 E TOWN ST Columbus, OH 43215-4801	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/19/2025	5 Payee name FRIENDS OF TIM MOORE	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO BOX 97275 RALEIGH, NC 27624-7275	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name FRIENDS OF TOM PATTON	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 17157 RABBIT RUN DRIVE Strongsville, OH 44136-6243	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/16/2025	Payee name Friends For Gregory Meeks	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 499 S. Capitol Street SW Suite 420 Washington, DC 20003-4027	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/12/2025	5 Payee name Friends of George Lang	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 4679 WINTERSET DRIVE Columbus, OH 43220-8113	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 12/02/2025	Payee name Friends of Jason Barrett	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 3045 Greenburg Road Martinsburg, WV 25404-0440	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 10/21/2025	Payee name Kaufmann for State House	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1527 330th St. Wilton, IA 52778	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/12/2025	5 Payee name Larry Strickland Campaign Committee	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 70 Pine Level, NC 27568-0070	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/19/2025	Payee name MCBRIDE FOR DELAWARE INC.	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO BOX 1904 WILMINGTON, DE 19899	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/19/2025	Payee name MCDOWELL FOR CONGRESS	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO BOX 80172 RALEIGH, NC 27623-0172	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 07/23/2025	5 Payee name Mattern, Mark	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 1011 Centre Rd Ste 402 Wilmington, DE 20250	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Refund of Excessive Contribution	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund of Excessive Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Michael Meredith for State Representative	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 464 Oakland Rd Oakland, KY 42159-6842	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/12/2025	Payee name NC2DC LEADERSHIP PAC	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3410 Alabama Avenue Alexandria, VA 22305-1736	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 09/12/2025	5 Payee name North Carolina Republican Party	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1506 Hillsborough St Raleigh, NC 27605-1831	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/30/2025	Payee name REPUBLICAN SENATE CAMPAIGN COMMITTEE	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 4679 WINTERSET DRIVE Columbus, OH 43220-8113	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name RLNC PAC	
Amount (\$) \$6,800.00	Payee address; City; State; Zip Code PO Box 97275 Raleigh, NC 27624	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 11/05/2025	5 Payee name ROUNDS FOR SENATE	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code 317 Oak Lane c/o Tyler Burr Richmond, VA 23226-1638	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Robbie Morris for State Senate	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 131 Castle Rock Drive Elkins, WV 26241-9752	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Shope for Senate	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 1230 Coolidge, AZ 85128	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/21/2025	5 Payee name Sinclair for Iowa	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1255 King Rd. Allerton, IA 50008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Steve Wilson for Ohio	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 102 East Orchard Avenue Lebanon, OH 45036	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Texas Consumer Credit Coalition PAC	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code P.O. Box 310269 New Braunfels, TX 78131	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/16 Rpt:	2 FILER NAME OneMain Holdings Inc. PAC	3 Filer ID (Ethics Commission Filers) 00084139
4 Date 10/27/2025	5 Payee name Vote Hendrix	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1718 S 140th Place Gilbert, AZ 85295-4734	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 10/27/2025	Payee name Vote Mesnard	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1427 W Homestead Ct Chandler, AZ 85286	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 10/27/2025	Payee name Vote Wilmeth	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 73163 Phoenix, AZ 85050-1037	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	