

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 # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 601 NW 2nd St. Evansville, IN 47708			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Ryan NICKNAME LAST SUFFIX Black			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 601 NW 2nd St. Evansville, IN 47708			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 601 NW 2nd St. Evansville, IN 47708			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (812) 492-2186			
9 REPORT TYPE	<input 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 Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025			
11 ELECTION	ELECTION DATE Month Day Year 11/03/2026		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

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

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 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

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

Mr. Ryan Black

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 217

17 COMMITTEE NAME OneMain Holdings Inc. PAC		18 Filer ID (Ethics Commission Filers) 00084139
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 64,407.49
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 66,880.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input 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 6 Contributor address; City; State; Zip Code Fargo, ND 58103	7 Amount of Contribution (\$) \$5.00
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 Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler Contributor address; City; State; Zip Code Fargo, ND 58103	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

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4 Date 10/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tyler <hr/> 6 Contributor address; City; State; Zip Code Fargo, ND 58103	7 Amount of Contribution (\$) \$5.00
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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#: _____) Bailer, John <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Quality Coordinator		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Nicholas Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$5.00
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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Business Ops Improvement		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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 <hr/> 6 Contributor address; City; State; Zip Code Mathews, NC 28105	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Dist Mgr		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belmonte, Natasha <hr/> Contributor address; City; State; Zip Code Mathews, NC 28105	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

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 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$38.46
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD, Chief Compliance Officer		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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#: _____) Benson, Michael <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$38.46
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MONETARY POLITICAL CONTRIBUTIONS

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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$500.00
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/196 Rpt: 20/217
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Fin Systems, Data & Info Delivery		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brennan, Michael <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Patrick <hr/> Contributor address; City; State; Zip Code Clayton, NC 27520-2282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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#: _____) 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2422	7 Amount of Contribution (\$) \$5,000.00
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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VP/D Fin Acctg		9 Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Maryann <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP/D Fin Acctg		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code Fort Mill, SC 29715	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/MD Product Suppt		9 Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, Robert <hr/> Contributor address; City; State; Zip Code Fort Mill, SC 29715	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Product Suppt		Employer (See Instructions) OneMain
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Phyllis <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2422	Amount of Contribution (\$) \$5,000.00
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 <hr/> Contributor address; City; State; Zip Code West Valley City, UT 84120-8210	Amount of Contribution (\$) \$96.15
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 <hr/> Contributor address; City; State; Zip Code West Valley City, UT 84120-8210	Amount of Contribution (\$) \$96.15
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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) 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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Eva <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Human Resources		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/MD Govt Relations		9 Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clancy, Austin <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2422	7 Amount of Contribution (\$) \$5,000.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604-2934	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) 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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> 6 Contributor address; City; State; Zip Code Longview, TX 75604-2934	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) 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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Longview, TX 75604-2934	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain

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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain

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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delutri, Steven <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain

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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/MD Treasury		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Thomas <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	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 <hr/> 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 <hr/> 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 <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) VP/SMD 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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

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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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$18.16
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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$18.16
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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$18.16
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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drennan, Robert <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$18.16
Principal occupation / Job title (See Instructions) Manager - Platform		Employer (See Instructions) OneMain
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Gary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$13.46
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 <hr/> 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: 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 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 08/22/2025	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 09/05/2025	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 11/28/2025	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
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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: 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 <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$19.23
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	7 Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Assoc General Counsel		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebert, Bryan <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	7 Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	7 Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Assoc Dir Engineer - Software		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	7 Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137-4615	Amount of Contribution (\$) \$12.00
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$192.31
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gage, Margaret <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31
8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		9 Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain
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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 <hr/> 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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$192.31
Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$192.31
8 Principal occupation / Job title (See Instructions) VP/SMD Head of External Affairs		9 Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) 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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) VP/D Ops Support		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gannon, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) 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 <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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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 <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Danny <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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
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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 <hr/> Contributor address; City; State; Zip Code Irving, TX 75062-2354	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) HRIS Analyst Sr		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 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ashley <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2487	7 Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2487	Amount of Contribution (\$) \$3.85
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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$27.00</div>
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$27.00</div>
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Eloy Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$27.00
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 Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$27.00
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 Contributor address; City; State; Zip Code Danville, KY 40422	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hannah, Philip <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	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 <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150-4030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
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Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hufnagel, Melissa <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$5.00
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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 <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Engineer - Software		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Debra <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		Employer (See Instructions) OneMain

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#: _____) Kubba, Sundus <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Strategic Initiatives & Insurance		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
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Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kubba, Sundus <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$38.46
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MONETARY POLITICAL CONTRIBUTIONS

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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 <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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

MONETARY POLITICAL CONTRIBUTIONS

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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCopo, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGassa, David <hr/> 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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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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
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4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> 6 Contributor address; City; State; Zip Code Evansville, IN 47708	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/D Mktg Programs		9 Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leasure, Susan <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Mktg Programs		Employer (See Instructions) OneMain
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehman, Gregg <hr/> 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 <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> 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 <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lejeune, Christina <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
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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 <hr/> Contributor address; City; State; Zip Code Aberdeen, NC 28315	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
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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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) HRIS Mgr		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robin <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2422	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Board Director		Employer (See Instructions) OneMain Holdings, Inc.

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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#: _____) Marshall, Lee <hr/> 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
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/196 Rpt: 103/217
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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
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathew, Ciby <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
Principal occupation / Job title (See Instructions) VP/MD Engineer - Platform		Employer (See Instructions) OneMain
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauerman, Michelle <hr/> Contributor address; City; State; Zip Code Cook County, IL 60525	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Deputy General Counsel		Employer (See Instructions) OneMain

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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccalmont, Holly <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mark <hr/> 6 Contributor address; City; State; Zip Code West Valley City, UT 84120	7 Amount of Contribution (\$) \$416.66
8 Principal occupation / Job title (See Instructions) VP/SMD, Auto		9 Employer (See Instructions) OneMain
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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	Amount of Contribution (\$) \$3.85
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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 <hr/> 6 Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	7 Amount of Contribution (\$) \$3.85
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4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Davia <hr/> 6 Contributor address; City; State; Zip Code Hinesville, GA 31313-4447	7 Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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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#: _____) Moss, Ashley <hr/> Contributor address; City; State; Zip Code Laurel, MS 39440-1834	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$3.85
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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, James <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$19.23
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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#: _____) Nelson, Warren <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2452	7 Amount of Contribution (\$) \$57.69
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$57.69
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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$57.69
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> 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 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nukathoti, Kiran <hr/> 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

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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 <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
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Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$38.46
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$38.46
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Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$38.46
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 Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Communications		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogburn, Kelly <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$38.46
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Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Dana <hr/> Contributor address; City; State; Zip Code Opelika, AL 36801-6196	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain

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

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

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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
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Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Christina <hr/> Contributor address; City; State; Zip Code Steubenville, OH 43952-3540	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/SMD Branch Operations		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Katie <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$19.23
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4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pugh, Jane 6 Contributor address; City; State; Zip Code Somerset, PA 15501	7 Amount of Contribution (\$) \$7.69
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
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
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4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> 6 Contributor address; City; State; Zip Code Plainfield, IL 60585	7 Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Armando <hr/> Contributor address; City; State; Zip Code Plainfield, IL 60585	Amount of Contribution (\$) <div style="text-align: right;">\$3.85</div>
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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#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) VP/MD Underwriting		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rangel, Elia <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85282	Amount of Contribution (\$) \$3.85
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Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruskey, Noah <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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 <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$19.23
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4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruthart, Angela <hr/> 6 Contributor address; City; State; Zip Code Paris, TX 75462-5206	7 Amount of Contribution (\$) <div style="text-align: right;">\$9.62</div>
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 <hr/> Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) <div style="text-align: right;">\$9.62</div>
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 <hr/> Contributor address; City; State; Zip Code Paris, TX 75462-5206	Amount of Contribution (\$) <div style="text-align: right;">\$9.62</div>
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Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
Principal occupation / Job title (See Instructions) Engineer - Software		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santosuosso, John <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) <div style="text-align: right;">\$19.23</div>
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: 157/196 Rpt: 160/217
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#: _____) Santosuosso, John <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) 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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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8 Principal occupation / Job title (See Instructions) SVP Corp Communications		9 Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Howard <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
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Principal occupation / Job title (See Instructions) SVP Corp Communications		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David <hr/> Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain

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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, David Contributor address; City; State; Zip Code New York, NY 10017-2452	Amount of Contribution (\$) \$115.38
Principal occupation / Job title (See Instructions) SVP Treasurer		Employer (See Instructions) OneMain
Date 10/31/2025	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
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 Contributor address; City; State; Zip Code Pearland, TX 77584-8466	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain
Date 10/17/2025	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
Principal occupation / Job title (See Instructions) Branch Mgr_11456		Employer (See Instructions) OneMain

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8 Principal occupation / Job title (See Instructions) Branch Mgr_11456		9 Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-8466	Amount of Contribution (\$) \$5.00
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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/196 Rpt: 167/217
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4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sifuentes, Brenda <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584-8466	7 Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-8466	Amount of Contribution (\$) \$5.00
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#: _____) Sifuentes, Brenda <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-8466	Amount of Contribution (\$) \$5.00
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/196 Rpt: 168/217
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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017-2422	7 Amount of Contribution (\$) \$5,000.00
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 <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain

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MONETARY POLITICAL CONTRIBUTIONS

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Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swaim, Adam <hr/> Contributor address; City; State; Zip Code Reidsville, NC 27320-6035	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) Branch Mgr_11553		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Dist 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#: _____) Tedder, Michael <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Dist Mgr		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedder, Michael <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
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#: _____) Tedder, Michael <hr/> Contributor address; City; State; Zip Code Greensboro, NC 27407	Amount of Contribution (\$) \$19.23
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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#: _____) Teel, Ashlyn Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teel, Ashlyn Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/196 Rpt: 174/217
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#: _____) Teel, Ashlyn <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
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Principal occupation / Job title (See Instructions) VP/D Govt Relations		Employer (See Instructions) OneMain

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/196 Rpt: 175/217
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4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> 6 Contributor address; City; State; Zip Code Mount Vernon, IL 62864	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Branch Mgr_10156		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Branch Mgr_10156		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Regina <hr/> Contributor address; City; State; Zip Code Mount Vernon, IL 62864	Amount of Contribution (\$) \$3.85
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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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$7.69
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Lead Engineer - Infrastructure		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

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Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
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Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thorne, Daniel <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$3.85
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MONETARY POLITICAL CONTRIBUTIONS

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Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timlen, Donna <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21202-4673	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) SVP, Head of Compliance & Controls Processes		Employer (See Instructions) OneMain

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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
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Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
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 <hr/> 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 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tooley, Holly <hr/> Contributor address; City; State; Zip Code Evansville, IN 47708	Amount of Contribution (\$) \$3.85
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 <hr/> 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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/196 Rpt: 189/217
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#: _____) Wassam, Dana <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 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 <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassam, Dana <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/SMD Operations Strategy & Planning		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/196 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 <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	7 Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19805-1266	Amount of Contribution (\$) \$38.46
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/196 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 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		9 Employer (See Instructions) OneMain
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Brian Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/196 Rpt: 193/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
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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: 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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Assoc Dir Product Mgmt		9 Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/196 Rpt: 195/217
2 FILER NAME OneMain Holdings Inc. PAC		3 Filer ID (Ethics Commission Filers) 00084139
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Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
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Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodyard, Tracey <hr/> Contributor address; City; State; Zip Code London, KY 40741-7288	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) VP/MD Collection Strategy		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10017	7 Amount of Contribution (\$) \$38.46
8 Principal occupation / Job title (See Instructions) VP/RD Branch Operations		9 Employer (See Instructions) OneMain
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Shannon <hr/> Contributor address; City; State; Zip Code New York, NY 10017	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) VP/RD Branch Operations		Employer (See Instructions) OneMain

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 ☐ 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
08/22/2025

Full name of contributor ☐ 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

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 200/217

2 FILER NAME

OneMain Holdings Inc. PAC

3 Filer ID (Ethics Commission Filers)
00084139

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

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

7 Pledgor Address; City; State; Zip Code

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

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

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 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	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/21/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/16 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/17/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Atlantic Union Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1051 E Cary St Richmond, VA 23219-0019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Service Charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 70 Pine Level, NC 27568-0070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2025	Payee name MCBRIDE FOR DELAWARE INC.	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1904 WILMINGTON, DE 19899	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2025	Payee name MCDOWELL FOR CONGRESS	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 80172 RALEIGH, NC 27623-0172	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1011 Centre Rd Ste 402 Wilmington, DE 20250	
8 PURPOSE OF EXPENDITURE	(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 <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 464 Oakland Rd Oakland, KY 42159-6842	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2025	Payee name NC2DC LEADERSHIP PAC	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3410 Alabama Avenue Alexandria, VA 22305-1736	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1506 Hillsborough St Raleigh, NC 27605-1831	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/30/2025	Payee name REPUBLICAN SENATE CAMPAIGN COMMITTEE	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4679 WINTERSET DRIVE Columbus, OH 43220-8113	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2025	Payee name RLNC PAC	
Amount (\$) \$6,800.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 97275 Raleigh, NC 27624	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 317 Oak Lane c/o Tyler Burr Richmond, VA 23226-1638	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2025	Payee name Robbie Morris for State Senate	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 131 Castle Rock Drive Elkins, WV 26241-9752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2025	Payee name Shope for Senate	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1230 Coolidge, AZ 85128	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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