

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Solutia Inc. Citizenship Fund

ADDRESS (Number and street)

575 Maryville Centre Drive

(Check if address is changed)

PO Box 66760

St. Louis

MO

63166

6760

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

jestri@solutia.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

314-874-2721

2. DATE

02 / 26 / 2004

3. FEC IDENTIFICATION NUMBER

C C00328856

4. IS THIS STATEMENT

X

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Alan G. Faust

Signature of Treasurer

Electronically Filed by Alan G. Faust

Date

02 / 26 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9630
Local 202-894-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

 _____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

Solutia Inc. Citizenship Fund

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name Janet E. Striker

Mailing Address 575 Maryville Centre Drive
P. O. Box 66760
St. Louis MO 63166 - 6760

Title or Position ▼ Paralegal CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 314 - 674 - 6959

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Alan G. Faust

Mailing Address 575 Maryville Centre Drive
St. Louis MO 63166 - 6760

Title or Position ▼ Dir, Public Affairs CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 314 - 674 - 4468

Full Name of Designated Agent Janet Striker

Mailing Address 575 Maryville Centre Drive
P. O. Box 66760
St. Louis MO 63166 - 6760

Title or Position ▼ Assistant Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 314 - 674 - 6959

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America

Mailing Address

Customer Connection

Dallas

TX

75283 - 2406

CITY Δ

STATE Δ

ZIP CODE Δ

Glenn Jernigan is no longer an Assistant Treasurer for North Carolina.