Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) HEXION INC. POLITICAL ACTION COMMITTEE 180 EAST BROAD ST ADDRESS (number and street) (Check if address is changed) COLUMBUS 43215 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS john.kompa@hexion.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00486944 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT 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. Bidstrup, Mark, , , Type or Print Name of Treasurer Bidstrup, Mark, , , [Electronically Filed] 05 02 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FF	C E	m 1 (Pavisad 02/2000)	Paga <b>2</b>				
		m 1 (Revised 02/2009)  DMMITTEE	Page 2				
Candidate Committee:							
(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 Candida							
Candida Party A		n Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candida							
Party	Com	mittee:					
(d)			Democratic, epublican, etc.) Party				
Politic	cal A	etion Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party				
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint F	Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political				
	Comr	nittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Na	me		
HEXION INC.	POLITICAL ACTION	I COMMITTEE	
6. Name of Any Connected	d Organization, Affiliated Committee, Jo	oint Fundraising Representati	ve, or Leadership PAC Sponsor
Hexion Inc.			
Mailing Address	180 East Broad Street		
	Columbus	OH	43215 
	CITY	STATE	ZIP CODE
Relationship: x Connec	cted Organization Affiliated Committee	Joint Fundraising Represe	entative Leadership PAC Sponsor
<ol> <li>Custodian of Records: lo books and records.</li> </ol>	dentify by name, address (phone number	optional) and position of the	e person in possession of committee
	Pete,,,		
Full Name	,180 East Broad St.		
Mailing Address			
			40045
	Columbus	OH	43215
Title or Position	CITY	STATE	ZIP CODE
SVP, Ch. Legal Ofc.		Telephone number	614 - 225 - 4791
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) , assistant treasurer).	of the treasurer of the committ	ee; and the name and address of
Full Name Bidstrup of Treasurer	o, Mark, , ,		
Mailing Address	180 East Broad St.		
	Columbus	OH	43215
Title or Position	CITY	STATE	ZIP CODE
Executive VP & CFO		Telephone number	614 - 225 - 2025

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Full Name of Designated Agent	Kompa, John, , ,						
Mailing Address	180 East Broad St.						
	Columbus OH 43215  CITY STATE ZI	IP CODE					
Title or Position Assistant Treasur	er Telephone number 614	25 2223					
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. The Huntington National Bank							
L	41 South High St.						
Mailing Address	HCO 810						
	Columbus OH 43287						
	CITY STATE Z	IP CODE					
Name of Bank, De	epository, etc.						
L							
Mailing Address							
	CITY STATE Z	IP CODE					